

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 05607	
2. NAME OF OPERATOR Marathon Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Bx 220, Hobbs, New Mexico		7. UNIT AGREEMENT NAME North Indian Basin Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FSL and 1650' FEL		8. FARM OR LEASE NAME North Indian Basin Unit Gas "Com"	
14. PERMIT NO.		9. WELL NO. 6	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) Gr 3846'		10. FIELD AND POOL, OR WILDCAT Undesignated (Indian Basin Upper Penn.)	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4-21S-23E	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Cementing interm. casing	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Drilled to 2100'. Pumped in 200 bbls. of mud w/lost circ. material w/no returns. Ran 66 jts. of 9-5/8" casing, 36#, 8R, J-55, ST&C, Rge. 2, Eff. 2034.14', Overall 2052.62', set from 18.00' below KDB to 2055.50'. Last setting depth includes Baker circ. flex flow collar and guide shoe, 3.36'. Bottom 3 jts. Baker locked, bottom 200' covered w/cent. baskets @ 1035', 815', 635', and 560'. Washed from 2025' to 2055' w/800 bbls. of water w/no returns. Cemented by Hallitorton w/1300 sacks of Trinity Lite Wate w/12 1/2# Gilsonite per sack, followed w/200 sacks of Class A cement w/2% CC. Pump press. 600#, final 1200#. Circ. out approx. 300 sacks to pit. Cement stayed at surface. Waited 5 hrs., cut off 9-5/8" casing, orange peeled 13-3/8" casing around 9-5/8". W.O.C 24 hrs. Tested casing w/2500# for 30 min., held O.K.

18. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Area Supt.

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE
CONDITIONS OF APPROVAL, IF ANY:

DATE 7-8-67

RECEIVED
JUL 11 1967
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

*See Instructions on Reverse Side