

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. G. C. C. COPY
SUBMIT IN THIS
(Other instruction
reverse side)

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Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 12097

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☐ GAS WELL ☒ OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME Rocky Arroyo
3. ADDRESS OF OPERATOR 1800 Wilco Bldg., Midland, Texas 79701		9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit J, 1980 FSL & 1980 FEL		10. FIELD AND POOL, OR WILDCAT Rocky Arroyo, Wolfcamp, 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Morrow
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4393.0 Gr.	12. COUNTY OR PARISH Eddy
		13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☒	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐	(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.)*

We are going to T&A the Morrow formation on this well and re-frac the Wolfcamp.

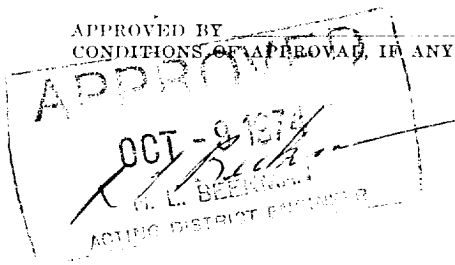
18. I hereby certify that the foregoing is true and correct

SIGNED C. D. Ryan TITLE Production Clerk DATE 10-7-74

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____



*See Instructions on Reverse Side

RECEIVED
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO