

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse 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		RECEIVED APR 4 1973 O.F.C. ARTESIA, OFFICE
2. NAME OF OPERATOR Hanagan Petroleum Corporation		
3. ADDRESS OF OPERATOR Box 1737, Roswell, New Mexico 88201		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FNL & 1980' FEL		
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3514 KB	

5. LEASE DESIGNATION AND SERIAL NO. NM-0374057-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME ----
7. UNIT AGREEMENT NAME Catclaw Draw
8. FARM OR LEASE NAME Catclaw Draw Unit
9. WELL NO. 5
10. FIELD AND POOL, OR WILDCAT Catclaw Draw Morrow
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 25-21S-25E
12. COUNTY OR PARISH Eddy
13. STATE New Mex.

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"/>	

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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Reperf.</u>	

(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.)*

PBTD 10788', Pkr. 10581'. Repperf. 4 SPF w/tubing gun from 10670-78, 10684-92, 10702-10 and 10713-22. Set Baker Model R double grip packer @ 10581. Ran 334 jts. 2-7/8" 6.5# tubing. Treated w/3000 MS 7½% + 1000 CFN₂ /bbl. Avg. inj. rate 5 BPM. Max. treating press. 6400#.

Before reperf. - 400 MCFGPD, no wtr.
After reperf. - 500 MCFGPD, no wtr.
After 3000 gal. acid - 1000 MCFGPD.

RECEIVED
APR - 2 1973
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED M. L. Southwick TITLE Agent DATE 3/23/73

(This space for Federal or State office use)

TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

APR - 3 1973

H. L. BEEKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side