

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TR  
(Other instructi  
verse side)CATE  
on reForm approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0558014

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Meadco Properties, Ltd.		8. FARM OR LEASE NAME Harris-Bell	
3. ADDRESS OF OPERATOR 407 West Wall St., 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 660' FEL, 1980' FNL Section 5, T-21-S, R-29-E, Eddy County, New Mexico		10. FIELD AND POOL, OR WILDCAT Golden Lane Field	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 5, T21S, R29E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3459.0 GR		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"/>	

## 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) Running 8-5/8" casing	X

(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.) \*

1/1/73 Drilled 12-1/4" hole to 4050'. Ran 97 joints 8-5/8" 28# and 24# casing to 4050' RTM. Cemented with 2900 sacks Halliburton light weight with 5# gilsonite and 1/4# flocele per sack and 200 sacks Class "C" cement with 1/4# flocele and 2% calcium chloride per sack. Temperature survey showed top of cement at 1120'. Ran 1" Kobe to 1000'. Pumped 300 sacks Halliburton light with 5# gilsonite and 1/4# flocele per sack. After 5 hours did not have any fill. Pumped 100xx Class C with 4% calcium chloride. After 3 hours did not have any fill. Pumped 100 sacks Class C with 4% calcium chloride. Cement came up to 200' from the surface.

1/2/73 Plug down WOC 1/2/73.

WOC 24 hours.

Tested BOP to 1500# for 30 minutes. Tested okay.

Started drilling ahead in 7-7/8" hole.

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

SIGNED Bell C. EtnaTITLE AgentDATE 1/16/73

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side