

UNITED STATES  
DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPI  
(Other Instructions  
verse side)

FE  
no.

Form approved,  
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-06299

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FEDERAL E Gas Com

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Dos Hermanos-Morrow Ect

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

21-20-30 NMPM

12. COUNTY OR PARISH

EDDY

N.M.

SUNDRY NOTICES AND REPORTS ON WELLS

(This form is to be used to report on the drilling or plugging back to a different reservoir,  
or for other purposes as may be determined by the Bureau for such proposals.)

DRILLING

Production Company

CREATOR

HOBBS, N. M. 88240

Report location clearly and in accordance with any State requirements.

1550 FSL x 1900 FEL Sec. 21 (UNIT J. NW/4 SE/4)

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIR

REPAIR

WELL

DRILL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR STIMULATING

(Other)

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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

Excels Drilling Corp spudded 26" hole 8:45 PM 1-30-74.  
On 2-3-74, 20" OD 94" Casing was set @ 370' w/  
500 SX Incon + 4% bel + 200 SX Incon neat. 1/2 salt sat.  
ure. 100 p4. WOC 24 hours. Tested casing w/  
600 psi for 30 min. Test O.K.  
Reduced hole to 17 1/2" @ 370' & resumed drilling.

RECEIVED

NEW MEXICO  
SANTA FE, NEW MEXICO

I hereby certify that the foregoing is true and correct

*Ray G. Gorman*

TITLE ADMINISTRATIVE ASSISTANT

DATE FEB 4 1974

place for Federal or State office use

APPROVED BY  
AGENCY OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side