

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions
verse side)

Form approved
Budget Bureau No. 42-21424

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 Drilling Well

2. NAME OF OPERATOR Inexco Oil Company

3. ADDRESS OF OPERATOR 1301 Americana Building, Houston, Texas 77002

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1200' FNL & 1200' FWL

14. PERMIT NO. _____

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
KB 3361, DF 3360, GL 3345

5. LEASE DESIGNATION AND SERIAL NO.
NM 84 B

6. IF INDIAN, ALLOTTEE OR TRUST NAME _____

7. UNIT AGREEMENT NAME None

8. FARM OR LEASE NAME Arco Fed. Com.

9. WELL NO. 1

10. FIELD AND POOL, OR WELLCAT Catchlaw Draw

11. SEC., T. & R., N., OR S.W. 1/4, AND SURVEY OR AREA Sec. 20-215-26

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) <u>Setting 5-1/2" casing</u>	<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.) *

1. Drilled 7-7/8" hole from below 8-5/8" casing at 2302' to a total depth of 11,050'.
2. Ran and cemented 283 jts. 5-1/2", 17#, N-80, LT&C, 8rd casing at 11,050' with DV Tool at 4198'. First stage: 700 sx. Class H, 0.75% CFR-2 & 5#/sx. salt. Calculated cement top 8,000'. CIP 11:15 P.M., 9-8-73. Second stage: 460 sx. Class C & 5#/sx. salt. Calculated cement top 2000'. CIP 1:30 A.M., 9-9-73. PBTD 10,969'.

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

SIGNED Terry W. Ellstrom TITLE District Engineer DATE October 18, 1973
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

100-100000-1

RECEIVED
FBI
JAN 12 1964
FBI
JAN 12 1964
FBI
JAN 12 1964

RECEIVED
FBI
JAN 12 1964
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JAN 12 1964
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JAN 12 1964