

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions
reverse side)SEE
reForm approved
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM 0354232

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Elizondo-Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Undes. LaHuerta Morrow

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

Section 21-T21S-R27E

12. COUNTY OR PARISH 13. STATE

Eddy

New Mexico

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.)

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JUN 11 1974

O.C.C.

DISTRICT OFFICE

1. OIL ☐ GAS ☐ OTHER ☒

2. NAME OF OPERATOR

Cities Service Oil Company

3. ADDRESS OF OPERATOR

Box 1919 - Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State DISTRICT OFFICE
See also space 17 below.)
At surface

1980' FSL & 1780' FWL of Sec. 21-T21S-R27E, Eddy Co. N.Mexico.

14. PERMIT NO.

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

3192' GR.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Extension of exp. date

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

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.)*

It is requested that the expiration date to commence drilling of this well
be extended due to the lack of availability of a drilling rig.

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SURVEY

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

SIGNED

TITLE

Region Oper. Mgr.

DATE

June 6, 1974

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUN 10 1974

THIS APPROVAL IS VALID FOR 180 DAYS
EXPIRES 10/10/1974

*See Instructions on Reverse Side