

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

(Other instruction on reverse side)

Budget

5. LEASE DESIGNATION AND SERIAL NO.

NM 0554203

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Kempner Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 18 T-22-S, R-26-E

12. COUNTY OR PARISH 13. STATE

Eddy

N.M.

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Robert N. Enfield

3. ADDRESS OF OPERATOR

P.O. Box 2431, Santa Fe, New Mexico 87501 D. C. C.

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

330' FSL & 2310' FWL

14. PERMIT NO.

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

GR 3440

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

REPAIRING WELL

☐
☒
☐
☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

Set 1 joint 10 3/4" 34#

Circulated cement to surface

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

SIGNED

TITLE

Operator

DATE

7/17/74

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

JUL 19 1974

R. L. BEEKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side