

U. S. G. COPY
 DEPARTMENT OF THE INTERIOR (Reverse Side)
 GEOLOGICAL SURVEY

Copy to SF

6. LEASE DESIGNATION AND SERIAL NO.

NM 0554203

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.)

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

RECEIVED

2. NAME OF OPERATOR

Robert N. Enfield ✓

NOV 4 1976

3. ADDRESS OF OPERATOR

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
 at surface

ARTESIA, OFFICE

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

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)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

Location and roads cleaned.

Regulation marker installed.

Plugged 7/28/74

Set Cement Plugs

150' plug @ 765' - 615'

50' plug at surface

Ready for Inspection

RECEIVED

DEC 11 1975

U. S. GEOLOGICAL SURVEY
 ARTESIA, NEW MEXICO

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

SIGNED

Robert N. Enfield

TITLE Operator

DATE 12/9/75

(This space for Federal or State office use)

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side