

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THE MANNER
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424

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 ☐		7. UNIT AGREEMENT NAME Big Eddy	
2. NAME OF OPERATOR Perry R. Pass		8. FARM OR LEASE NAME Big Eddy Unit	
3. ADDRESS OF OPERATOR Box 1178, Monahans, Texas 79756		9. WELL NO. 41	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FSL & 1980' FEL of Sec. 35 - Unit letter J.		10. FIELD AND POOL, OR WILDCAT Wildcat	
14. PERMIT NO.		11. SEC., T., R., E., M., OR BLK. AND SURVEY OR AREA Sec. 35, T21S, R28E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3178.4' GL		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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) <u>Report of DST #2</u> ☒	
(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.)*

See attached sheet.

RECEIVED

OCT 1 1974

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED H. P. Hurst, Jr.

TITLE Division Production Clerk

DATE Sept. 30, 1974

(This space for Federal or State office use)

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE OCT 1 1974

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1963--O-685229

997-851

1. NAME OF THE PARTY 2. ADDRESS 3. CITY 4. STATE 5. ZIP CODE		6. DATE OF BIRTH 7. SEX 8. RACE 9. RELIGION 10. OCCUPATION	
11. EDUCATION 12. MARITAL STATUS 13. NUMBER OF CHILDREN 14. DATE OF MARRIAGE		15. DATE OF DEPARTURE 16. DATE OF RETURN 17. DATE OF ARRIVAL	
18. NAME OF THE PARTY 19. ADDRESS 20. CITY 21. STATE 22. ZIP CODE		23. DATE OF BIRTH 24. SEX 25. RACE 26. RELIGION 27. OCCUPATION	
28. EDUCATION 29. MARITAL STATUS 30. NUMBER OF CHILDREN 31. DATE OF MARRIAGE		32. DATE OF DEPARTURE 33. DATE OF RETURN 34. DATE OF ARRIVAL	

Johna Hedgcock