

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THIS DATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0554955

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

W. Airport Fed. Com.

9. WELL NO.

1-Y

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 29, T-22-S, R 26-E

12. COUNTY OR PARISH

13. STATE

Lddy

N.M.

1

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

C & K Petroleum, Inc.

3. ADDRESS OF OPERATOR

607 Midland National Bank Bldg., Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

2250' FN and 990' FE Liras, Sec. 29, T-22-S, R-26-E

14. PERMIT NO.

15. REMARKS (Show whether oil, gas, or etc.)

16

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

NATURE OF NOTICE, REPORT, OR OTHER DATA

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

X

X

X

X

X

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 THE SCOPE OR COMPLETION OF OPERATIONS (If well is directionally drilled, give a bearing location and measured and true vertical depths for all markers and zones pertinent to this work.)*

Following is the altered intermediate casing program for our Application for Permit to Drill dated 11-25-74 and approved 11-27-74.

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4"	9-5/8"	36#	2400'	800 sx. to be circ.

RECEIVED
12-17-74
MIDLAND, TEXAS
GEOLOGICAL SURVEY

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

SIGNED

Administrative Supervisor

DATE 12-17-74

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



19. (This space for Reverse Side)