

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIE
(Other instruction, on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON

(Do not use this form for proposals to drill or to deepen a well in a different reservoir.
Use "APPLICATION FOR PERMIT--" for proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Drilling Well		5. LEASE DESIGNATION AND SERIAL NO. NM-020795	
2. NAME OF OPERATOR DAVID FASKEN		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 608 First National Bank Bldg., Midland, Texas 79701		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FWL and 3300' FSL		8. FARM OR LEASE NAME Shell Federal Comm.	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3565.7' GR.		10. FIELD AND POOL, OR WILDCAT Cemetery Morrow Gas	
12. COUNTY OR PARISH Eddy		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 5, T-21-S, R-24-E	
13. STATE New Mexico		12. COUNTY OR PARISH Eddy	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(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.)

1. Drilled to 4764' w/fresh water & installed PVT & flowline sensor.
2. 11-16-78, TD 4764', tested BOP's, choke manifold, hydril, casing head & spool.
3. 11-20-78, TD 6465', increasing potash to 4%.
4. 11-22-78, TD 7107', DST #1 7076'-7107', details attached.
5. 12-01-78, TD 9670', DST #2 9610'-9670', details attached.
6. 12-03-78, TD 9765', DST #3 9724'-9765', details attached.
7. 12-07-78, TD 10020', logging CNL-FDC & DLL.
8. 12-08-78, TD 10020', straddle DST #4 9775'-9816', details attached.
9. 12-09-78, TD 10020', straddle DST #5 8690'-8731', details attached.
10. 12-10-78, TD 10020', P & A well as follows: Mud characteristics--Vis 50, wt 9.4, WL 10.8
Cement Plug #1 125 sx 9850'-9500'
Cement Plug #2 80 sx 8750'-8550'
Cement Plug #3 70 sx 7150'-6950'
Cement Plug #4 60 sx 5100'-4900'
Cement Plug #5 65 sx 3100'-2900'

Surface plug not to be set per telephone conversation with Mr. Jim Knauf--well to be capped with tubing head, tubing hanger flange and valves.

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

SIGNED Robert H. Angovine AgentDATE December 13, 1978

(This space for Federal or State office use)

APPROVED BY Joe J. Lara TITLE ACTING DISTRICT ENGINEERDATE JAN 5 1979

CONDITIONS OF APPROVAL, IF ANY: