

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
N.M.O.C.D. COPY
SUBMIT IN TRIPLICATE*
(Other Instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.NM-0384628 NM-05672
NM-020342 NM-34465
C. SF
G. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Drlg. Well		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR COTTON PETROLEUM CORPORATION ✓		8. FARM OR LEASE NAME FEDERAL 24	
3. ADDRESS OF OPERATOR 420 Wall Towers West, Midland, Texas, 79701		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FS&EL Sec. 24, T-21-S, R-23-E U.S. GEOLOGICAL SURVEY HOLDS, NEW MEXICO		10. FIELD AND POOL, OR WILDCAT Indian Basin, Upper Penn.	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 24, T-21-S, R-23-E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3796' GR		12. COUNTY OR PARISH Eddy	
		13. STATE N.M.	

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 type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input 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 checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<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.)*

6-25-79 7560'. ND BOP. (0') 26 days. MW 9.5, Vis 32. Spotted 150' cmt plugs @ 7500', 6150' & 3150'. Spotted 100' cmt plug @ 2050'.

6-26-79 (0') 27 days. Placed 25 sx plug @ surface. Capped w/steel. Placed DHM @ surface. RR @ 11 AM MST, 6/25/79. FINAL REPORT. WELL P & A'd.

RECEIVED



JUL 8 1980

O. C. D.
ARTESIA, OFFICE
RECEIVED
JUL 5 1979
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED  (L. G. Langley), Division Production Manager DATE 7/2/79

(This space for Federal or State office use)

APPROVED BY  PETER W. CHESTER TITLE  DATE JUL 1 1980

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.5. LEASE DESIGNATION AND SERIAL NO.
NM-0384628 NM-05612
NM-020342 NM-34465
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____b. TYPE OF COMPLETION:
NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other D & A'd2. NAME OF OPERATOR
Cotton Petroleum Corporation ✓3. ADDRESS OF OPERATOR
420 Wall Towers West Midland, Texas 797014. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 660'FS & EL Sec 24, T-21-S, R-23-E
At top prod. interval reported below
At total depth14. PERMIT NO. DATE ISSUED
Per attached letter

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal 249. WELL NO.
110. FIELD AND POOL, OR WILDCAT
Upper Indian Basin, Penn11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
24, T-21-S, R-23-E12. COUNTY OR PARISH
Eddy13. STATE
N.M.

15. DATE SPUDDED 5-30-79 16. DATE T.D. REACHED 6-24-79 17. DATE COMPL. (Ready to prod.) - P & A 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3796' GR 19. ELEV. CASINGHEAD -

20. TOTAL DEPTH, MD & TVD 7650' 21. PLUG, BACK T.D., MD & TVD Surface 22. IF MULTIPLE COMPL., HOW MANY* - 23. INTERVALS DRILLED BY → 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

25. WAS DIRECTIONAL SURVEY MADE
None- Well was p & A'd NO26. TYPE ELECTRIC AND OTHER LOGS RUN
CNL-FDC, (TD to Surface) DLL (TD to 2000') 27. WAS WELL CORED
NO

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8	48#	312'	17 1/2	350 sx - surface	None
8 5/8	24#	2000'	12 1/4	1295sx - surface	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
NONE					NONE		

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)				MATERIAL USED			
NONE							

33.* ARTESIA, OFFICE PRODUCTION
DATE FIRST PRODUCTION Well D & A'd PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ARTESIA, NEW MEXICO
WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
			→				
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE Division Production Mgr DATE 7-19-79

*(See Instructions and Spaces for Additional Data on Reverse Side)