

CKF

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED BY

MAY 07 1965

SUNDAY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or to test for different reservoirs.
Use "APPLICATION FOR PERMIT" for such proposals.

1. O.C.D.

APPROPRIATE ☒ WELL ☐ OTHER

1965 MAY -2 IN 9 00

2. NAME OF OPERATOR

CASA PETROLEUM, INC.

3. ADDRESS OF OPERATOR

105 NORTH SEVEN STREET

ARTISTIA, MICHIGAN 49710

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

See List of States below.
At Surface

660' NW 1/4 & 660' EEL of Section

(UNIT A)

(NE 1/4 NE 1/4)

11. PERMIT NO.

12. OPERATOR (Show well log, etc., if any)

3900 OL

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

NOTICE OF INTENTION TO:

WATER SHUT-OFF

PULL OR ALTER Casing

FRACURE TREATMENT

REPAIR OR COMPLETE

SURFACE ALIQUOT

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

X

SUBSEQUENT REPORTS:

WATER SHUT-OFF

REPAIRING WELL

FRACURE TREATMENT

ALTERING Casing

SHOOTING OR ALIQUOTING

ABANDONING

(Other)

(NOTE: Report results of testing operations on well condition or production data, including a detailed date of completion of work.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly set forth all pertinent details and also pertinent data, including a detailed date of completion of work, if well is abandoned, give reference locations and measured and true vertical depths for all formations and logs sent to this work.)

PLAN TO PLUG WELL AS FOLLOWS:

SET CAST IRON BRIDGE PLUG @ 6250' SHUT OFF BONE SPRING
CEMENT WITH 15 SKS ON TOP
SET CAST IRON BRIDGE PLUG @ 4550' SHUT OFF DELAWARE
CEMENT WITH 15 SKS ON TOP
SET CAST IRON BRIDGE PLUG @ 3000' SHUT OFF DELAWARE
CEMENT WITH 15 SKS ON TOP
SET CAST IRON BRIDGE PLUG @ 2000' SHUT OFF RECO
CEMENT WITH 15 SKS ON TOP
SET 10 SACK PLUG AT SURFACE
SET DRY HOLE MARKER
CLEAN LOCATION.

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

SIGNED

Mary Khan

TITLE

Secretary

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side