

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
N. M. O. C. C. COPY
SUBMIT IN THE
(Other instruct on re-
verse side)(one / copy 4 51
Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-064200

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "D"

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Black River Penn (Gas)

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

Sec 12, T24S, R 26E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mex.

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		RECEIVED		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Joseph I. O'Neill, Jr. ✓		APR 7 1975		8. FARM OR LEASE NAME Federal "D"	
3. ADDRESS OF OPERATOR 410 West Ohio, Midland, Texas 79701		O. C. C. ARTESIA OFFICE		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit Letter - P E 660 FSL & 660 FSL, Sec 12, T24S, R 26E		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3244' GL, 3262' KB		10. FIELD AND POOL, OR WILDCAT Black River Penn (Gas)	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3244' GL, 3262' KB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 12, T24S, R 26E	
16. PERMIT NO.		17. ELEVATIONS (Show whether DF, RT, GR, etc.) 3244' GL, 3262' KB		12. COUNTY OR PARISH Eddy	
18. STATE		19. STATE		20. STATE	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

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 Reccompletion 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.) *

Completed operations

Plug #1 50 sx squeezed down tbg by Halliburton, top 11480'.
Plug #2 75 sx 9738 to 9950' by Permian Basin Casing Pullers.
Plug #3 75 sx 8000 to 7788' by Permian Basin Casing Pullers.
Plug #4 75 sx 6643 to 6850' by Halliburton in & out of 9-5/8".
Plug #5 10 sx 3 to 30' by Permian Basin Casing Pullers.
13-3/8" steel plate welded on with well marker.

2-3/8" tbg cut off @ 10,025'

5-1/2" csg shot off @ 9950'

Will call when location is ready for final inspection

RECEIVED
APR - 4 1975
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Robert Rigaud

TITLE

Drilling Foreman

DATE

4-3-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side