N. M. O. C. C. COPY

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[redacted]

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 ☒ GAS WELL ☐ OTHER

RECEIVED
FEB 26 1975
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

2. NAME OF OPERATOR
Thornton Hopper ✓

3. ADDRESS OF OPERATOR
Box 121 Mentone, Texas 79754

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
330 N - 330 W
NW/4 NW/4 Sec. 13, T24S, R26E

5. LEASE DESIGNATION AND SERIAL NO.
LC 065421

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Bradley Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT
Black River Bel

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 13, T24S, R26E

12. COUNTY OR PARISH
Edy

13. STATE
New Mex.

14. PERMIT NO.
Unknown (2-28-47 (Completed)

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
Unknown

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other)			
(Other) Chg. from TA to Producer	☐			(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.)*

Proposed operation:

Change well from TA to producing by removing red line and red line unit and replacing with an individual pumping unit.
Pull rods and change out down hole pump.
Work to be completed early part of March, 1975*

* See attached letter

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

SIGNED Thornton Hopper TITLE Owner - Operator DATE 2-25-75

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

/s/ Buchan

*See Instructions on Reverse Side