

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THE REVERSE SIDE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0405444-A

6. 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> DRY		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Texas American Oil Corporation		8. FARM OR LEASE NAME Todd "26" Federal
3. ADDRESS OF OPERATOR 1012 Midland Savings Building, Midland, Texas 79701		9. WELL NO. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL, 1980' FWL		10. FIELD AND POOL, OR WILDCAT Sand Dunes (Cherry Canyon)
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3416 GR, 3427 KB	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 26, T-23-S R-31-E
		12. COUNTY OR PARISH Eddy
		13. STATE New Mexico

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"/>	

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"/>	

(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.)*

7-1-70: 6048' TD
8-3/4" hole to 5948'
7-13/16" hole 5948-6048'
Propose to plug as follows (per telephone approval from USGS Artesia office):

100 ft plug (40 sax)	4500-4400'
100 ft plug (40 sax)	3000-2900'
100 ft plug (40 sax)	1500-1400'
100 ft plug (40 sax)	650- 550'
20 ft plug (8 sax)	20'-surface

RECEIVED

AUG 28 1970

O. G. B.
ARTESIA, OFFICE

RECEIVED
AUG 27 1970

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

SIGNED J. L. [Signature] TITLE Production Supt. DATE 8-25-70

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
AUG 27 1970

R. L. BEEKMA
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side