

ARTESIA OFFICE COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on reverse side)

Form approved
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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Dry Hole</u>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <u>Robert N. Enfield</u>	8. FARM OR LEASE NAME <u>Federal 1-28</u>
3. ADDRESS OF OPERATOR <u>P.O. Box 2431, Santa Fe, N.M. 87501</u>	9. WELL NO. <u>1</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>1980 FSL & 330 FWL, Sec. 28, T-24-S, R-28-E</u>	10. FIELD AND POOL, OR WELLBOAT <u>Wildcat</u>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 28, T-24-S, R-28-E</u>
14. PERMIT NO. <u>30-015-20956</u>	12. COUNTY OR PARISH <u>Eddy</u>
15. ELEVATIONS (Show whether DF, RT, OR, etc.)	13. STATE <u>New Mexico</u>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)*

Set 45 sack plug 2425-2520
Set 45 sack plug 350-250
Set 20 sack plug at surface
Install regulation marker-10-22-73
Clean & level location when pits dry.

① 2920

(noted) J. G. LARA
JUN 28 1976

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NOV 23 1973
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED <u>[Signature]</u>	TITLE <u>Operator</u>	DATE <u>11-20-73</u>
(This space for Federal or State office use)		
APPROVED BY <u>[Signature]</u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

(noted) D. F. GORDON
JUN 28 1976