

UNITED STATES GEOLOGICAL SURVEY
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-077534

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Wood Canyon Unit

8. FARM OR LEASE NAME

Wood Canyon Unit

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

24-T24S-R25E.

12. COUNTY OR PARISH

Eddy Co.

13. STATE

New Mexico

1.

OIL WELL ☐ GAS WELL ☒ OTHER

RECEIVED

2. NAME OF OPERATOR

Chaparral Production, Inc. ✓

MAR 3 1975

3. ADDRESS OF OPERATOR

4815 S. Harvard, Suite 305, Tulsa, OK 74135

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)

At surface

ARTESIA, OFFICE

1980' FNL and 1650' FEL NE/4

14. PERMIT NO.

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

3863

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

Lost hole @ 112'. 27' of 16" conductor set and cemented back to surface. 15" hole to 112'. Lost cable tool bit, top of 15" bit @ 96'. Filled hole back to surface w/caliche.

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

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

SIGNED Frank J. Schuman

TITLE Engineer

DATE Feb. 19, 1975

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side