

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 <input checked="" type="checkbox"/> GAS <input checked="" type="checkbox"/> WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		MAR 7 - 1979		5. LEASE DESIGNATION AND SERIAL NO. LC 064200	
2. NAME OF OPERATOR J. H. Conine, Jr.		O. C. C. ARTESIA, OFFICE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 402 First National Bank Building, Midland, Tx. 79701				7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FWL & 1980' FNL Sec. 1				8. FARM OR LEASE NAME O'Neill-Fed.	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3267 GL		9. WELL NO. 1	
				10. FIELD AND POOL, OR WILDCAT S. Carlsbad, Morrow	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1, T24S-R26E	
				12. COUNTY OR PARISH Eddy	
				13. STATE N.M.	

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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input 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.)*

4 1/2" @ 12,100' TOC 10,100'
8 5/8" @ 2,235' Circulated
13 3/8" @ 200' Circulated

Top Perfs 10,713' - 718'
11,408' - 450'

Proposed Procedure

1. Pull tubing
2. 200' plug @ 11,300'
3. 200' plug @ 10,600'
4. Pull 4 1/2 est. 10,000'
5. 200' plug @ stub
6. 3 - 150' plugs between stub 2235'
7. 150' plug @ 2185'
8. 100' plug in top.

RECEIVED
NOV 14 1978
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Owner

DATE July 3, 1978

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE MAR 6 - 1979

CONDITIONS OF APPROVAL, IF ANY: