

UNITED STATES OF AMERICA
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved,
Budget Project No. 42 R1474.

1. LEASE DESIGNATION AND SERIAL NO.

NM 031963

2. IF INDIAN, ALLOTTEE OR TRUST NAME

3. UNIT AGREEMENT NAME

4. FARM OR LEASE NAME

Sundance Federal

5. WELL NO.

1

6. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 4, T24-S, R-31-E

8. COUNTY OR PARISH 9. STATE

Eddy New Mexico

10.

1. TYPE OF WELL (X) OTHER

2. NAME OF OPERATOR

El Paso Natural Gas Co.

3. ADDRESS OF OPERATOR

600 Bldg. of the Southwest, Midland, Texas 79701

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

At surface

Unit F 1980 FNL & 1980 FWL of Section

11. DEPTH OF WELL

12. ELEVATIONS (Specify whether FE, RT, GR, etc.)

3402.3 Gr.

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

14. NATURE OF INTENTION TO:

1. TEST WATER FOR FLOW

2. TEST FOR TOXIC

3. TEST FOR ACIDIZING

4. REPAIR WELL

(Other)

5. TEST OR ALTER CASING

6. COMPLETELY COMPLETE

7. CHANGE*

8. CHANGE PLANS

15. SUBSEQUENT REPORT OF:

9. WATER SHUTOFF

10. FRACTURE TREATMENT

11. SHOOTING OR ACIDIZING

(Other) Running surface & int. csg.

(Note: Report results of multi- (completion or Recompletion Report and Log form.)

12. REPAIRING WELL

13. ALTERING CASING

14. ABANDONMENT*

16. DESCRIBE THE WELL (Give depth, casing, etc., in detail, and give pertinent dates, including completed date of surface or any other work. If well is drilled, give subsurface locations and measured and true vertical depths for all markers and logs pertinent to this work.)

Drilled 26" hole to 662', ran 20" 94# H-40 casing set @ 658'. Cemented w/900
sx Class C cement, circ. 75 sx. WOC 24 hrs. Tested to 500# - held OK. 12-14-71
Drilled 17 1/2" hole to 4265', ran 13 3/8" 61# S-80 casing set @ 4263.5'. Cemented
w/3000 sx HLW cement, tailed in w/400 sx Class C cement. Circ 709 sx. Tested to
1000# for 30 min - held OK. 1-7-72

RECEIVED

JAN 12 1972

O. C. C.
ARTESIA, OFFICE

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

SIGNED

[Signature]

TITLE Supervisor-Prod. Services

DATE 1-7-72

(Only space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JAN 11 1972

H. L. BEEKMAN

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side