

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYForm approved: *Copy to SF*
Budget Bureau No. 42 R1424.
5. LEASE DESIGNATION AND SERIAL NO.
NM 0476685-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 checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME HAY HOLLOW UNIT	
2. NAME OF OPERATOR GREAT WESTERN DRILLING COMPANY ✓		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR P. O. BOX 1659 MIDLAND TX 79701		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface UNIT J, 2080' FSL & 1980' FEL, Sec. 11, T-26-S, R-27-E		10. FIELD AND POOL OR WILDCAT HAY HOLLOW (STRAWN) <i>has</i>	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3214' GR	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11, T-26-S, R-27E		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

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

12/29/75 Swabbed well. Recovered 2 bbls black water. Well would not flow.

12/30/75 Treated well with 2500 gals. 15% N.E. acid through 5½" csg. perforations @ 11,611' - 11,632' and 11,635' - 11,642'. Swabbed well off and placed well back on production.

Production prior to treatment was -0-.

Production after treatment: 1-5-76, flowed 1,729 MCFPD on 13/64" choke with flowing tubing pressure of 2,650 psi.

NOTE: Well was not stimulated when completed on 4-2-75.

RECEIVED

JAN 14 1976

O. C. C.
ARTESIA, OFFICE

RECEIVED

JAN 12 1976

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE

General Superintendent

DATE

1-9-76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side