

c/5F

RECEIVED BY **ARTESIA, NM 88210**
DRAWER DD
APR -3 1985
O.C.D.
UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
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.)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.
NM-23765
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Phillips Fed.
9. WELL NO.
1
10. FIELD AND POOL, OR WILDCAT
Brushy Draw Del. ~~Ext.~~
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 1, T26-S, R29-E
12. COUNTY OR PARISH
Eddy
13. STATE
NM

1. ARTESIA, OFFICE
OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
JFG ENTERPRISE
3. ADDRESS OF OPERATOR
P.O. Box 100, Artesia, New Mexico 88210
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FSL & 660' FEL, Sec. 1, T-26S, R-29E
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3028' Gr.

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Perf. & Acidize</u>	

(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.)*

3-13-85 Drilled out DV tool.

3-14-85 Ran Compensated Nuetron Log and Cement Bond Log with Collar Locator, Perforated 20 holes. (5924'-5930'-5936'-5942'-5948'-5960'-5968'-5980'-5994'-5998'-6005'-6015'-6024'-6030'-6064'-6075'-6082'-6087'-6105'-6119')

3-15-85 Acidize with 3000 gal. 10% NE FE. Swab Back. Good oil and gas cut before dark.

3-16-85 Swab back - good oil and gas.

3-18-85 Swab back and trip tubing to ready well for pumping unit.

3-19-85 Swab and rig down.

3-20-85 Waiting on pumping unit.

MAR 22 1985

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

SIGNED [Signature] TITLE Agent DATE 3-21-85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: [Signature]

APR 2 1985

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO