

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 ☒ GAS WELL ☐ OTHER ☐	6. LEASE DESIGNATION AND SERIAL NO. NM-35607
2. NAME OF OPERATOR J.C. WILLIAMSON ✓	7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P.O. BOX 16 MIDLAND, TEXAS 79702	8. FARM OR LEASE NAME UCBHW FEDERAL
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1787' FSL & 330' FWL	9. WELL NO. 9
10. FIELD AND POOL, OR WILDCAT BRUSHY DRAW DELAWARE	11. SEC., T., S., R., OR BLK. AND SURVEY OR AREA Sec. 25, T26S-R29E
12. COUNTY OR PARISH EDDY	13. STATE NEW MEXICO

RECEIVED BY
JAN 31 1986
O. C. D.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PUTTING OR ALTERING CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETION ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDONMENT* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) Spud and surface casing ☐	
(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 and 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.)*

01-26-86 Spudded in @ 9:00 am

01-26-86 Ran 8-5/8" casing, set and cemented @ 450' w/300 sx Class "C" 2% CaCl₂, 1/4# floseal/sx., PD @ 8:30 pm. No returns, tagged cement w/1" @ 189.

ACCEPTED FOR RECORD

JWC
JAN 30 1986

CARLSBAD, NEW MEXICO

I hereby certify that the foregoing is true and correct

SIGNED <i>[Signature]</i>	TITLE Production	DATE 1-27-86
(Leave space for Federal or State office use)		
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side