

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

USE THIS IN LEFT  
(Other instruction  
verse side)

Expires August 31, 1985

C/SF

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

2. NAME OF OPERATOR J.C. Williamson

3. ADDRESS OF OPERATOR P.O. Box 16 Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with all State requirements.  
See also space 17 below.)  
At surface  
330' FSL & 330' FEL

RECEIVED BY  
JAN 24 1986  
O. C. D.  
ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO. NM 20367

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME MWJ Federal

9. WELL NO. 5

10. FIELD AND POOL, OR WILDCAT Brushy Draw Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR ALTA Sec. 35  
T-26-S, R-29-E

12. COUNTY OR PARISH Eddy 13. STATE NM

14. PERMIT NO. 30-015-25536 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 2867.0 GR

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>Ran 8 5/8" casing</u>	
(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.)\*

01-17-86 Set and cemented 8 5/8" casing @ 2800' w/200 sx Class "C", 2% CaCl, 1/4# flocele/sx. PD @ 6:00 pm 1-16-86.

ACCEPTED FOR RECORD  
*[Signature]*  
JAN 21 1986  
CARISBAD, NEW MEXICO

I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Drilling DATE 01-20-86

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

