

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPI
(Other instructions
reverse side)

FE
re-

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
NM-18626

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
N/A

7. UNIT AGREEMENT NAME
N/A

8. FARM OR LEASE NAME
Yvonne Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
East Ross Draw Delaware

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 24, T26S, R30E.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
MAY 11 '88

2. NAME OF OPERATOR
Corinne B. Grace ✓ O. C. D.
ARTESIA, OFFICE

3. ADDRESS OF OPERATOR
P. O. Box 1418, Carlsbad, New Mexico 88220

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

1980' FEL & 1980' FSL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3145.4 GR

12. COUNTY OR PARISH
Eddy

13. STATE
NM

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) Spud & Run Surface

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.)*

Spud 17½" hole 7:30 p.m. 4/30/88 to 935'.
Run 908' 13 3/8" 54.50# J-55 ST&C casing.
Cement with 850 sx Class "C" + 2% CaCl₂ + ¼# Flocele
per sx.
Circulate 300 sx to surface.
Plug down @ 12:15 p.m. 5/1/88.

RECEIVED
MAY 6 11 03 AM '88
CARLSBAD RESOURCE
AREA HEADQUARTERS

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

SIGNED Mike Butts TITLE Agent

DATE 5/4/88

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD
DATE _____

MAY 9 1988

*See Instructions on Reverse Side

SJS
CARLSBAD, NEW MEXICO