

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

NM - 38464

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Pure Gold A Federal #9

9. API Well No.

n/a

10. Field and Pool, or Exploratory Area

W. Sand Dunes (Delaware)

11. County or Parish, State

Eddy, NM

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Kaiser-Francis Oil Company

3. Address and Telephone No.

P. O. Box 21468, Tulsa, OK 74121-1468 918-491-4314

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Surface: 10' FSL & 280' FWL of Sec. 16-23S-31E

BHL: 480' FNL & 480' FWL of Sec. 21-23S-31E

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent

☐ Subsequent Report

☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☐ Other

☒ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Proposal to change the intermediate casing program as follows:

Run and set 8 5/8", 32# casing @ 4070' with a stage tool @ 3000'. Cement to surface with 1300 sxs cmt.

JAN 6 '95

NOV 11 16 33 PM '94

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

Signed

Charlotte Van Valkenburg

Title

Charlotte Van Valkenburg
Technical Coordinator

Date 11/14/94

(This space for Federal or State office use)

Orig. Signed by Shannon J. Shaw

Approved by

Conditions of approval, if any:

Title PETROLEUM ENGINEER

Date 1/4/95