

Form 9-331  
(May 1963)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

**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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <b>Wildcat</b>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <b>Kerr-McGee Corporation</b>	8. FARM OR LEASE NAME <b>Navajo A</b>
3. ADDRESS OF OPERATOR <b>P.O. Box K, Sunray, Texas 79086</b>	9. WELL NO. <b>1</b>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  <b>2310'FNL, 330'FEL Sec 12, T23N, 20W San Jaun County, New Mexico</b>	10. FIELD AND POOL, OR WILDCAT <b>Wildcat</b>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>7590 RKB</b>
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>12-T23N-R20W</b>	12. COUNTY OR PARISH <b>San Jaun</b>
13. STATE <b>New Mexico</b>	

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

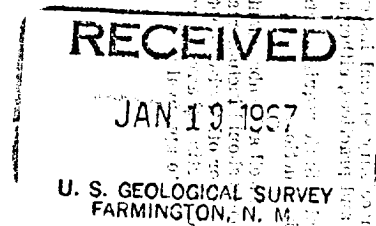
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	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) <input type="checkbox"/>	
(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.)\*

Spudded 1-5-1967. Drilled 15" hole to 285' RKB, Set 10 3/4", 40.50', J-55 Casing at 274' GL, 284.5 RKB. Cemented with 300 sks common cement. Circulated out apprx. 50 sks. Plug down 1-8-67 at 6:30 AM. Tested casing and cement 1000' for 30 minutes after waiting on cement 24 hrs.

PLEASE KEEP THIS INFORMATION CONFIDENTIAL.



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

SIGNED <u><i>Alfred E. Hester</i></u>	TITLE <b>Division Superintendent</b>	DATE <b>1-14-1967</b>
(This space for Federal or State office use)	<b>Oil &amp; Gas Production</b>	
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

\*See Instructions on Reverse Side