

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved  
Budget Bureau No. 42-11424

5. LEASE DESIGNATION AND SERIAL NO.

NM-0560223

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Frew Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Nipp Pictured Cliff

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec 20 - 26N - 12W

12. COUNTY OR PARISH  
San Juan

13. STATE  
New Mexico

1.

OIL ☐ GAS ☒  
WELL WELL OTHER

2. NAME OF OPERATOR

Kirby Exploration Company

3. ADDRESS OF OPERATOR

P.O. Box 1745, Houston, Texas 77001

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

At surface

1190' FSL & 1600' FWL

14. PERMIT NO.

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

6029 GR

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) ☐

REPAIRING WELL ☐

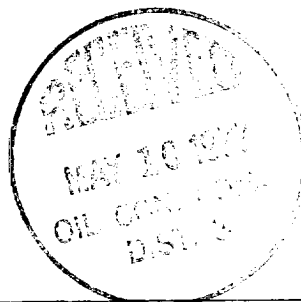
ALTERING CASING ☐

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.)\*

Drilled 6¼" hole to 1255 feet. Total depth at 3:40 p.m. 5-4-77. Ran open hole logs (IEL and FDC-CNL). Ran 30 joints 4½" OD casing and set at 1256 feet. Cemented with 200 sacks class "B" cement. Bumped plug at 5:44 p.m. 5-5-77. Wait on cement. Wait on completion unit.



MAY 6 1977

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

SIGNED

*William T. Jones*  
William T. Jones

TITLE

Agent

DATE

5-6-77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: