

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

QUALITY OF EMPLOYEES
OTHER INFORMATION ON REVERSE SIDE

With approved.
Bureau No. 2-11221
F. LEASE DESIGNATION AND SERIAL NO.
HOBBES STATE BANK
C. IF INDIAN, ALLOTTEE OR TRUSTE NAME

SUNDRY NOTICES AND REPORTS ON WELLS
(Do not use this form for proposals to drill or to deepen or plug back to different reservoir.
Use "APPLICATION FOR PERMIT" for such proposal)

RECEIVED SEP 27 10 16 AM '66

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR: HOBBES STATE BANK

3. ADDRESS OF OPERATOR: U. S. GEOLOGICAL SURVEY HOBBES, NEW MEXICO

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface: 660' FWL? 1990' FS. SEC 22, T10N14, R10E14 SW1/4

5. ELEVATIONS (Show whether BP, RT, CR, etc.): 4003' RD

6. LEASE DESIGNATION AND SERIAL NO.: HOBBES STATE BANK

7. WELLS AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.: 5

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR F.S. AND SURVEY OR AREA: 22-10-14 SW1/4

12. COUNTY OR PARISH: HOBBES

13. STATE: N.M.

13. 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"/>	

(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: 3:00 PM 9-6-66

DRILLED 8 3/4" HOLE TO 1815'. RAN 7" CASING TO 1815 AND CEMENTED W/ 375 SK CEMENT.

PLUG DOWN 6:15 PM, 9-7-66. CEMENT CEMENTED.

WOC 18 HRS. TESTED CASING TO 1000 PSI FOR 30 MINUTES.

HOLD RAY ON 9-8-66.

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

SIGNED Jay A. Murray TITLE Production Secretary DATE 9-21-66

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

APPROVED

SEP 22 1966

J. L. GORDON
ACTING DISTRICT ENGINEER