

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on
reverse side)

Permit approved.
Bure. of Reclam. No. 42 R1421.

ALLOW NOTICES AND REPORTS ON WELLS
(This form is to be used for proposals to drill or to deepen or plug back to a different reservoir.
See APPLICATION FOR PERMIT—* for such proposals.)

1. NAME OF APPLICANT: _____

2. NAME OF COMPANY: _____

3. ADDRESS OF OPERATOR: _____

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See APPLICATION FOR PERMIT—* below.)
1/2 SECTION 19S0' FEL S&C (G - SW 1/4 NE 1/4)

5. PERMIT NO.: _____

15. ELEVATIONS (Show whether DF, RT, CA, etc.)
332 DF

5. LEASE DESIGNATION AND SERIAL NO.
MA-1-10

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
WINDY & FEDERAL

9. WELL NO.
10

10. FIELD AND POOL, OR WILDCAT
LAUREL-500

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA
7-24-37 NMPH

12. COUNTY OR PARISH: 13. STATE
LEE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input 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"/>
SHOOTING OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELLS <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) 332 DF	

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

17. DATE WHEN BEGUN 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.) *

**WELL LOGGED OFF AND WAS SHUT IN -
LOGS REMOVED 1-20-72.**

**IT REMAINS IN STATUS PENDING CONTINUED PROD.
FROM WELL 15.1-D (SAME PRODUCTION UNIT) R-3930**

ILLEGIBLE

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

SIGNED _____ TITLE **AREA SUPERINTENDENT** DATE **JAN 27 1972**

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
**600-11-20-11
12-20-72**

ACCEPTED FOR RECORD

JAN 27 1972

U. S. GEOLOGICAL SURVEY
COBBS, NEW MEXICO

*See Instructions on Reverse Side

RECEIVED

FEB 1 1972

OIL CONSERVATION COMM.
HOUSTON, TEXAS