

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THIS FORM
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 056302-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 GAS WELL OTHER

2. NAME OF OPERATOR
HELMONT OIL COMPANY

3. ADDRESS OF OPERATOR
P. O. BOX 1305, ARTESIA, NEW MEXICO

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1980° FSL & 660° FWL of Sec. 33; T-16S, R-31E

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Kennedy

9. WELL NO.
5

10. FIELD AND POOL, OR WILDCAT
SQUARE LAKE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 33-16S-31E - NMPM

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

14. PERMIT NO.

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

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 type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" 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"/>
(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.)*

This well was frac'd as follows:

- 8-4-67 Pull rods and tubing and clean out w/sand pump
- 8-5-67 Frac with 500 gals 28% acid 500 bbls lease oil and 8500# of 20-40 sand
- 8-6-67 Return well to production
- 9-22-67 Recovered all frac oil
- 9-26-67 Five day production after recovery of frac oil well averaged 6 BO & 5 BW per day

RECEIVED
DEC 15 1967
GEOLOGICAL SURVEY
WASHINGTON

18. I hereby certify that the foregoing is true and correct
ORIGINAL SIGNED BY
SIGNED H. J. LEDBETTER TITLE Division Superintendent DATE 12/14/67

(This space for Federal or State office use)
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

APPROVED
DEC 14 1967
R. L. BENJAMIN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
UNITED STATES

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.)

NAME OF OPERATOR
WELL GAS
WELL OTHER

ADDRESS OF OPERATOR

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

PERMIT NO. 15. REVISIONS (Show whether by pt. or sec.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUTOFF
REPAIR OR TREAT
SHOOT OR ACIDIZE
CHANGE WELL

TEMP. OR ALTITUDE CHANGE
METHANE CONCENTR.
ABANDON*
CHANGE PLANS

WATER SHUTOFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING

U.S. GOVERNMENT PRINTING OFFICE: 1963 O-455229

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved by any State, on air lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well and date well site conditioned for final inspection looking to approval of the abandonment.

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

SIGNED _____

(This space for Federal or State office use)

APPROVED BY _____

CONDITIONS OF APPROVAL IF ANY:

*See instructions on Reverse Side