

**N.M.O.C.D. COPY**  
**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

*C/26*

5. LEASE DESIGNATION AND SERIAL NO.

NM-25954

**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.)

**RECEIVED**

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		MAY 15 1981	
2. NAME OF OPERATOR Maddox Energy Corporation ✓		O. C. D.	
3. ADDRESS OF OPERATOR Suite 906 Blanks Building, Midland, Texas 79701		ARTESIA, OFFICE	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL and 560' FEL Section 33		10. FIELD AND POOL, OR WILDCAT Wildcat Bone Spring	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T24S, R28E	
15. ELEVATIONS (Show whether depth or, etc.) 2974.3' GL		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

**RECEIVED**  
MAY 14 1981

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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Spud, set casing</u> <input checked="" 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.)\*

- 4/25/81 Spudded 17 1/2" hole with Hondo Drilling Company Rotary Rig #6.
- 4/27/81 Ran 13 3/8" 48# H-40 Rn 3 casing and set at 480' with 175 sx Hallib. Lite 2% CaCl followed by 300 sx Class C. Circulated 100 sx to pits.
- 5/4/81 Ran 8 5/8" 32# K55 8rnd Rn 3 casing and set at 2639' w/1275 sx Halliburton Lite w/8# salt and 1/4# flocele/gal. followed by 200 sx Class C 2% CaCl. Circulated 130 bbl to pits.

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

SIGNED *Quadra D. Cary* TITLE Operations Manager DATE 5/11/81

(This space for Federal or State Office Use)  
APPROVED BY ROGER A. CHAPMAN TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

**ACCEPTED FOR RECORD**  
MAY 14 1981  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

\*See Instructions on Reverse Side