N. M. O. C. C. COPY

DEPARTMENT OF THE INTERIOR SUBMIT IN TERMS (Other Instruct verse side)

CATE.

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NM 8365

Vadin	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.)

GEOLOGICAL SURVEY

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

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WELL WELL X OTHER NAME OF OPERATOR

Kingery Drilling Co., Inc.

ADDRESS OF OPERATOR P. O. Box 1588, Ardmore, Oklahoma

LOCATION OF WELL (Report location clearly and in accordance with any State requirements.

See also space 17 below.)

At surface At surface

1980 FNL, 660 FWL

vnne Federal WELL NO.

10. FIELD AND POOL, OR WILDCAT Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec.4, T-14-S, R-29-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR. etc.) G.L. 3681

12. COUNTY OF PARISH 13. STATE

New Mexico

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16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF:

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE

ABANDON* CHANGE PLANS WATER SHUT-OFF

FRACTURE TREATMENT SHOOTING OR ACIDIZING REPAIRING WELL ALTERING CASING

ABANDON MENT*

(Other) (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.)*

Perforated cag. 1521-1526. 2 shots per ft.

Treated with 5000# sand.

Swabbed back lead of 112 bbls and salt at 6 bbls per hr. Shut well.

Spotted 20 sx cement across perf. Shot 5 1/2" csg off at 1059' Spotted 25 sx cement. Spotted 25 sx cement 350'.

10 sx cement in at surface. Installed dry hole marker. Well plugged and abandoned 9/2/70.

RECEIVED

NOV 13 1970

C. C. C. ALTERIA, GFFICE

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

(This space for Federal or State office use)

TITLE

11011 DATE 多安基岛

APPROVED BY . CONDITIONS OF THE TOTAL, IF ANY:

*See Instructions on Reverse Side

ADDROVE N. L. REEKMA.