

UNITED STATES M. O. C. G. COPY
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0390104

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Haystack "A" Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Haystack Cisco Gas

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

28, T-6-S, R 27 E

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

1. OIL
WELL ☐ GAS
WELL ☒ OTHER

2. NAME OF OPERATOR

Forest Oil Corporation ✓

3. ADDRESS OF OPERATOR

P.O. Box 153 - Odessa, Texas 79760

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

710' FNL & 1,980' FWL, Sec. 28, T-6-S, R 27 E, NMPM

14. PERMIT NO.

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

4,071 GR

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

Test lower perforations selectively; perform necessary operations to isolate and shut off salt water source; re-perforate and re-acidize as required to recomplate.

RECEIVED

DEC 2 1971

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

RECEIVED

DEC 2 1971

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

R. M. Blacomb

TITLE

Engineer

DATE

November 30, 1971

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
DEC 2 - 1971
R. L. BECKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side