

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYNM SOIL CONSERVATION COMMISSION  
(Other Instructions re-  
drawn) NM 88210  
Artesia, NMForm approved.  
Budget Bureau No. 42-R1424.

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different horizon.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 17576	
2. NAME OF OPERATOR Sanders Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 11000-D Spain Road NE, Albuquerque, NM 87111		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 1980' FWL Sec. 6, T7S, R27E		8. FARM OR LEASE NAME Isler Federal	
14. PERMIT NO.		9. WELL NO. #2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3859' GL		10. FIELD AND POOL, OR WILDCAT Undesignated Abo	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 6, T7S, R27E	
		12. COUNTY OR PARISH Chaves	
		13. STATE NM	

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

## NOTICE OF INTENTION TO:

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"/>		<input type="checkbox"/>

## SUBSEQUENT REPORT OF:

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) Run casing & cement	<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.)\*

Spudded 12-1/4" hole 9:30 a.m. 10-20-81. Set 8-5/8" 24# J-55 API casing at 1571'. Cemented with 700 sx. Pacesetter 65/35 Poz 3% CaCl plus 250 sx. Class "C" 3% CaCl. Circulated out 95 sx. cement. Plug down at 2:00 a.m. 10-24-81. WOC 18 hours before drilling out; tested casing and BOP to 1500 psi before drilling out.

Ran 121 jts. 4-1/2" 11.6# casing, set at 4971' (4972.82'). Top of float collar at 4928'. Cemented with 575 sx. 50/50 Poz "C" plus 0.6% FLA plus 0.3% dispersant plus 3% KCL. Plug down at 6:25 p.m. 11-4-81.

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ROSWELL, NEW MEXICO

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

SIGNED ROSEMARY A. CHAPMANTITLE PresidentDATE 11-6-81

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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\*See Instructions on Reverse Side