

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM-17576

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Isler Federal

9. WELL NO.

#3

10. FIELD AND POOL, OR WILDCAT

Wildcat (San Andres)

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

Sec. 6, T7S, R27E

12. COUNTY OR PARISH
Chaves

13. STATE
N.M.

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Sanders Petroleum Corporation

3. ADDRESS OF OPERATOR

Suite 201, Bldg. #2; 7801 Academy Blvd. N.E. Albuquerque, N.M. 87109

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

At surface

2050' FNL & 1960' FEL

Sec. 6, T7S, R27E

14. PERMIT NO.

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

3885' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐

PULL OR ALTER CASING

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☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

Temporarily Abandon

☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

REPAIRING WELL

☐
☐
☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(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.)*

Temporarily Abandon, pending availability of water disposal facility.
Well will make average 4 bbls. oil per day and 50-60 bbls. water per day.

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

SIGNED

Charles H. Sanders

TITLE President

DATE 1/23/87

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR — MONTH PERIOD
ENDING JAN 28 1988

*See Instructions on Reverse Side

APPROVED
DATE
PETER W. CHESTER

JAN 28 1987

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

