



UNITED STATES SUBMIT IN TRIPLICATE\*  
DEPARTMENT OF THE INTERIOR (Other Instructions on re-  
GEOLOGICAL SURVEY verse side)

Form approved.  
BUDGET BUREAU No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.  
NM-18821

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
NORTH HAYSTACK FEDERAL

9. WELL NO.  
3

10. FIELD AND POOL, OR WILDCAT  
Wildcat Abo

11. SEC. T., R., M., OR BLK. AND  
SURVEY OR AREA  
Sec. 34-5S-26E

12. COUNTY OR PARISH  
Chaves

13. STATE  
New Mexico

1. OIL GAS  
WELL ☐ WELL ☒ OTHER

2. NAME OF OPERATOR  
Read & Stevens, Inc.

3. ADDRESS OF OPERATOR  
P.O. Box 1518, Roswell, NM 88201

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

660' FNL & 660' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3943' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐ PULL OR ALTER CASING ☐  
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐  
SHOOT OR ACIDIZE ☐ ABANDON\* ☐  
REPAIR WELL ☐ CHANGE PLANS ☐  
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐  
FRACTURE TREATMENT ☐ ALTERING CASING ☐  
SHOOTING OR ACIDIZING ☐ ABANDONMENT\* ☐  
(Other) REQUEST FOR APPROVAL TO USE PIT ☒

(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.)\*

The drilling pits on this location have not yet been broken and filled. It is our intention to use  
these pits to contain load fluid when this well is fracture stimulated. The well will be stimulated  
as soon as the pipeline is finished in the area. The construction of the line should be completed in  
60 days, therefore, we request approval to allow the pits to remain intact for 180 days to allow  
final completion of the well.

I hereby certify that the foregoing is true and correct

SIGNED B. Stubbbs

TITLE Drilling & Production Manager

DATE 3-8-85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

