

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-8808

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FEDERAL (USA) 'G'

9. WELL NO.

1

10. FIELD AND TOOL, OR WILDCAT  
UNDESIGNATED11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA  
SECTION 33, T-18-S,  
R-8-E

14. PERMIT NO.

REGULAR

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

NOT AVAILABLE

12. COUNTY OR PARISH

OTERO

13. STATE

NEW MEXICO

## 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.)\*

TOTAL DEPTH 235'

Spudded 26" Hole, 12:01 A.M., July 12, 1970

Ran 211' (6 joints) 20" O.D. 78# casing and set at 235'. Cement w/700 sx Class C w/1/4# Flocele and 1% CaCl per sx. Plug at 135'. Cement circulated. Job complete at 3:30 A.M., July 16, 1970.

Tested 20" O.D. casing w/600# for 30 minutes from 8:00 P.M. to 8:30 P.M., July 16, 1970. Tested O.K. Drilled out cement plug and retested w/600# for 30 minutes from 2:30 A.M. to 3:00 A.M. July 17, 1970. Tested O.K. Job complete 3:00 A.M. July 17, 1970.

RECEIVED RECEIVED

JUL 29 1970

JUL 20 1970

O. C. C.  
ARTESIA, OFFICEU. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

TITLE

Assistant District  
Superintendent

DATE July 17, 1970

(This space for Federal or State office use)

APPROVED BY

TITLE

DISTRICT ENGINEER

DATE JUL 27 1970

CONDITIONS OF APPROVAL, IF ANY: