

SUNDRY NOTICES AND REPORTS ON WELLS

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

RECEIVED BY

AUG 08 1985

(Arlen Dickson)

(915-686-9559)

ARTESIA, OFFICE

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR Dickson Petroleum, Inc. ✓	7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P.O. Box 50160, Midland, Texas 79710	8. FARM OR LEASE NAME Holly A Federal
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below) At surface 2215' FNL & 330' FWL of Section (Unit E) (SW/4 NW/4)	9. WELL NO. #1
10. FIELD AND POOL, OR WELDCAT Square Lake GR-SA	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 31, T-16S, R-30E	
12. COUNTY OR PARISH Eddy	13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANT

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

Spudding

(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 on 7/26/85 at 4:30 P.M. New Mexico time. TD on 7/27/85 at 370'.
Totco 1 3/4" at 370'. Red-bed formation. Bit#1 type 12 1/2" J-11 made 370'
in 6 hrs.. Drilled with fresh water.

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

SIGNED

Marlys Reynolds

TITLE

Consultant

DATE

7/30/85

(This space for Federal or State office use)

APPROVED BY

ACCEPTED FOR RECORD

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

AUG 6 1985

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO

I hereby certify that the foregoing is true and correct. I am not a party to any person knowingly and willfully to make to any department or agency of the State of New Mexico any false or misleading statements or representations as to any matter within its jurisdiction.