

Form 9-331
May 1963

Origin: USGS, Artesia DEPARTMENT OF THE INTERIOR

cc: Regional Office GEOLOGICAL SURVEY

cc: file

UNITED STATES

SUBMIT IN 1 LICATION
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 029426 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Sinclair Oil & Gas Company	8. FARM OR LEASE NAME H. E. West "B"
3. ADDRESS OF OPERATOR P. O. Box 1920, Hobbs, New Mexico	9. WELL NO. 24
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660 feet from North line and 660 feet from East line of Section 10-T17S-R31E	10. FIELD AND POOL, OR WILDCAT Grayburg Jackson
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 10-T17S-R31E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3942'	12. COUNTY OR PARISH Eddy
	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 <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) Perforate, acidize & convert <input checked="" 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) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Include 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 3604'. PBD 3595'. Well presently producing 3 BOPD and no water, Metex and Premier formation 3396-3402' and 3550-3560'.

PROPOSE TO: Perforate Square Lake approximately 3430-38', 3448-56' and 3462-68' w/ 2-3/8" jets per. ft. Breakdown Square Lake 3430-3468' w/approx. 1500 gals. mud acid. Run tubing and packer, nipple up to inject water.
Convert from oilwell to Water Injection Well in Keel West Waterflood Area.

RECEIVED

FEB 15 1966

D. C. C.
ARTESIA OFFICEREC
FEB
U. S. G. S.
ARTESIA

I hereby certify that the foregoing is true and correct

SIGNED

TITLE

Superintendent

DATE

2-11-66

(This space for Federal or State office use)

APPROVED
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
FEB 14 1966
H. L. DELLINGER
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side