

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
NM-0555569

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Artesia Seven Waterflood

8. FARM OR LEASE NAME

Green Federal

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Artesia QGSA

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

Sec 31, T-17-S, R-29-E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
DeltaUS Corporation

3. ADDRESS OF OPERATOR
3100 C, North "A" Street, Midland, Texas 79705

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

330' FNL 2310' ~~GR~~ ^{FEL}

14. PERMIT NO.

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

3641' GR

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) Spud

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.)*

The Green Federal No. 8 was spud at 4:00 PM on 10-12-84 with 11" bit.

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

SIGNED Ron K. Brown *Ron Brown* TITLE Sr. Engineer

DATE 10-25-84

(This space for Federal or State Office use)

APPROVED BY *[Signature]* TITLE *[Signature]*
CONDITIONS OF APPROVAL, IF ANY:

DATE

OCT 29 1984

*See Instructions on Reverse Side

NEW MEXICO