

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TR  
(Other, instruct  
verse side)CATE\*  
OR TOForm approved  
Budget Bureau No. 42 R1424.  
5. LEASE DESIGNATION AND SERIAL NO.  
N404175(b) Use No. 11/17  
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<br>Humble Oil & Refining Company ✓                                                                                                                                         |  | 8. FARM OR LEASE NAME<br>Abo Chalk Shuff Draw Unit                          |
| 3. ADDRESS OF OPERATOR<br>Box 2100, Hobbs, New Mexico                                                                                                                                          |  | 9. WELL NO.<br>25                                                           |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>2314<br>2514' from South Line. 330' from East Line. |  | 10. FIELD AND POOL, OR WILDCAT<br>Empire Abo                                |
| 14. PERMIT NO.                                                                                                                                                                                 |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 17, T-18-S, R-27-E |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>3141 D. F.                                                                                                                                   |  | 12. COUNTY OR PARISH<br>Eddy                                                |
|                                                                                                                                                                                                |  | 13. STATE<br>N. M.                                                          |

## 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)

PILL OR ALTER CASING

MULTIPLE COMPLETION

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 equipment 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.)\*

1. Frac perforations from 5316 - 5458' with 40,000 gals lease crude, using 2# sand per gallon and 5# Adomite Marc II per 100 gallons. Tail in with brads.
2. Run tubing, Pump and rods.
3. Place well on production

RECEIVED

JAN 27 1964

D. D. S.  
ARTESIAL OFFICERECEIVED  
JAN 24 1964  
U. S. GEOLOGICAL SURVEY  
ARTESIAL OFFICE MEXICO

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

SIGNED

ORIGINAL A. L. CARPENTER

TITLE Agent

DATE January

(For Federal or State office use)

TITLE

DATE

APPROVED  
JAN 24 1964  
H. L. BEECHAM  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side