

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other instruction
reverse side)

NOTE

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-068747

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NONE

7. UNIT AGREEMENT NAME

Northeast Caprock
Queen Unit

8. FARM OR LEASE NAME

Northeast Caprock
Queen Unit

9. WELL NO.

21

10. FIELD AND POOL, OR WILDCAT

Caprock Queen

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

Sec. 22, T-12-S, R-32-E

14. PERMIT NO.

Regular

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

4359' (D.F.)

12. COUNTY OR PARISH

Lea

13. STATE

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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Change to Water Injection Well

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 following work has been completed on subject well:

1. Pull rods and tubing.
2. Run 2-3/8" plastic coated tubing, and set at 2988'.
3. Water injection well completion, July 26, 1965.

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

SIGNED

Don Gillett

Don Gillett

TITLE

Assistant District

Superintendent

DATE

October 7, 1965

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

OCT 8 1965

Instructions on Reverse Side

J. L. GORDON
ACTING DISTRICT ENGINEER