

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

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"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 0149818	
2. NAME OF OPERATOR M & G Oil, Inc.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 957 Crossroads, New Mexico 88114		8. FARM OR LEASE NAME Wolf Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL & 1980' FEL		9. WELL NO. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Vada Penn	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4200' KB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 5, T-9-S, R-35-E	
		12. COUNTY OR PARISH Lea	13. STATE N.M.

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) <input 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 checked="" type="checkbox"/> Install pumping equipment	

(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.)*

3-25-85--Moved in and rigged up Permian Well Service. Picked up tubing string and ran in hole with a bull plugged tubing sub on bottom, a perforated tubing sub and a seating nipple. Tagged bottom at 9864'. Landed tubing on flange with tubing swinging 3.50' off bottom.

3-26-85--Ran pump and rods.

3-27-85--Rigged down Permian Well Service. Started installing pumping unit.

3-28-85--Installing pumping unit.

3-29-85--Waiting on replacement wrist pins for pumping unit.

3-30-85--Completed installing pumping unit and engine. Well on production at 5:00 P.M.

4-1-85--Well pumped up but producing 100% salt water.

Continuing production test

RECEIVED

APR 29 1985

HOBBS, NEW MEXICO

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

SIGNED Wm. Groesbeck

TITLE Vice President

DATE 4-19-85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MAY 1 1985

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO