

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM - 050475

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

West Sawyer (San Andres)

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

22-9S-37E

14. PERMIT NO.

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

3966 GR

12. COUNTY OR PARISH

Lea

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

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)

Running 4½" csg.

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.) *

Drilled 7 7/8" hole to 5085 TD. Ran 4½" OD, 10.5#, J-55 casing to 5085'. Cemented with 250 sx. Class "C" Cement, 2% gel. Plug down 8:30 p.m. 7-18-73. Good circulation throughout job.

Tested casing to 4,000# for 30 min. Test OK.

Waiting on completion.

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

SIGNED

TITLE

Production Clerk

DATE

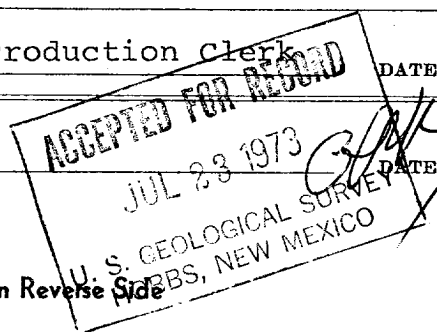
7-20-73

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side