	m 9-331 ay 1963)	UNITED STATES DEPARTMENT F THE INTERIOR GEOLOGICAL SURVEY	SUBMIT IN TRIPLICATE* (Other instructions on reverse side)	Form approved. Budget Bureau No. 42-R1424.  5. LEASE DESIGNATION AND SERIAL NO.  NM - 050475	
-	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.)			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
	OIL GAS	LL OTHER		7. UNIT AGREEMENT NAME	
2.	NAME OF OPERATO	IR.		8. FARM OR LEASE NAME	
	John	L. Cox		Federal	
3.	ADDRESS OF OPER	ATOR		9. WELL NO.	
	Box 2	217, Midland, Texas 79701		2	
i.	LOCATION OF WEL See also space 17 At surface	L (Report location clearly and in accordance with any State below.)	requirements.*	10. FIELD AND POOL, OR WILDCAT W. Sawyer (San Andres)	

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

22, 9S, 37E

Lea

SUBSEQUENT REPORT OF:

12. COUNTY OR PARISH 13. STATE

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

New Mexico

(Other) Running 8 5/8" casing X

(Other) (Other) Running 8 5/8" casing X

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. Describe 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.)\*

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

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

Spudded 124" hole on 12-6-74. Drilled to 401'.

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

8 5/8" 20# casing set @ 401' with 325 sx. Class H cement with 2% Calcium Chloride. Circulated 50 sx. Plug down 3:45 a.m. 12-7-74.

WOC 24 hrs.

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

14. PERMIT NO.

16.

Pressure test casing to 1000# for 30 minutes. Test OK.

Drilling ahead in 7 7/8" hole.

660' FEL & 1780' FSL

I hereby certify that the foregoing is true SIGNED Route Sill	and correct	Production Clerk	DATE	12-9-74
	enbach			
(This space for Federal or State office use)				
APPROVED BY	TITLE		ACCEDIF	U EUB KECAKA
CONDITIONS OF APPROVAL, IF ANY:	TITLE			<del>y 100.</del>
COMPLICATION OF INTERCEMENT AND ADDRESS OF THE COMPLETE AN				1 9 1974
			) DEC	A Tana
				AND AT STIRVE
	*See Instructi	ons on Reverse Side	U. S. G	LOGICAL SURVE