

COPY TO O. C. C.
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other Instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 15903-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

--

7. UNIT AGREEMENT NAME

--

8. FARM OR LEASE NAME

Flying M-McKay Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesignated Devonian

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

Sec. 26, T9S, R32E

12. COUNTY OR PARISH

Lea County

13. STATE

NM

1. OIL ☒ WELL GAS ☐ WELL OTHER ☐

2. NAME OF OPERATOR
PETROLEUM DEVELOPMENT CORPORATION

3. ADDRESS OF OPERATOR
9720 B Candelaria, NE, Albuquerque, NM 87112

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980' from the East Line, 1980' from the South Line; Sec. 26,
T9S, R32E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4320 GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Surface Casing

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

(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.)*

Spudded 5:45 pm 12-21-78.

Ran 11 jts. with 12-3/4" casing set @ 425'. Cemented with 500 sx. Class "C"
2% KCl, plugged down @ 11 am. Circulated 100 sx. cement. Tested casing for 30
minutes to 500 psi. Held OK.

RECEIVED
DEC 28 1978
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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

SIGNED

Paula D. Bartocci
Paula D. Bartocci

TITLE Secretary

DATE 12-26-78

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD
DEC 28 1978
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side