

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 45-R1421

SUNDY 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 ☒ GAS WELL ☐ OTHER ☐	5. LEASE DESIGNATION AND SERIAL NO. NM 0127752
2. NAME OF OPERATOR KERN COUNTY LAND CO.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME -
3. ADDRESS OF OPERATOR 418 FIRST STATE BANK MIDLAND, TEXAS	7. UNIT AGREEMENT NAME -
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	8. FARM OR LEASE NAME FEDERAL 24
14. PERMIT NO.	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 4324.0 GL	10. FIELD AND POOL, OR WILDCAT CHANGELOR AND ADLES
	11. SEC. T., R., M., OR BLM. AND SURVEY OR ALBA
	12. COUNTY OR PARISH 13. STATE ROOSEVELT NM

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)

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.)*

REACHED T. D. 4380' ON 8-18-66. RAN 4 1/2" 9.5# 1-55 CASING TO 4380' AND CEMENTED AT 4380' WITH 250 SX INCOR SALT SATURATED + 8% GGL CEMENT AND 100 SX INCOR + 10% SALT. PLUG DOWN 9:15 AM. 8-19-66. TESTED ONLINE TO 2000 PSI FOR 30 MINUTES - HELD OKAY.

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

SIGNED

Gay L. Gordon

TITLE

PROD. SECRETARY

DATE

8-24-66

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

APPROVED

AUG 25 1966

J. L. GORDON
ACTING DISTRICT ENGINEER