DEPARTMENT OF THE INTERIOR (See other side)

GEOLOGICAL SURVEY

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.)

5. LEASE DESIGNATION: NM 10 27782

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: -

1. OIL WELL [X] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME: -

2. NAME OF OPERATOR: Koch County Land Co.

8. FARM OR LEASE NAME: Federal 24

3. ADDRESS OF OPERATOR: 418 First State Bank Bldg., Midland, Tex.

9. WELL NO.: 3

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 660' FNL & 660 FEL Sec. 24, Unit A NE/4 NE/4

10. FIELD AND POOL, OR WILDCAT: Chaveroo-San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 24-7S-33E-NMPM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): To Be Furnished Later

12. COUNTY OR PARISH: Roosevelt

13. STATE: N.M.

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[X]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other)			
(Other)				(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 4340' TD on 10-23-66. Ran 4½" casing to 4340' and cemented w/ 350 sx cmt. Plug down 1:30 AM, 10-24-66. Tested casing to 2000 PSI for 30 minutes - held okay on 10-25-66.

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

SIGNED Gay L. Harris TITLE Production Secretary DATE 10-26-66

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

APPROVED
OCT 27 1966
A. R. BROWN
DISTRICT ENGINEER