Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 AND SERIAL NO.: NM 011629

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: —

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

7. UNIT AGREEMENT NAME: —

2. NAME OF OPERATOR: Kash County Land Co.

8. FARM OR LEASE NAME: Federal 21

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

9. WELL NO.: 1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 660' FWL & 660' FSL Sec 21 - Unit M SW/4 SW/4

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

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 21-7S-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 4400' TD on 10-11-66. Ran 4½" casing to 4393' and cemented w/ 350 sx Incor. Plug down 9:30 PM, 10-12-66. Tested casing to 2000 PSI for 20 minutes - Held okay on 10-12-66.

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

SIGNED Gary L. Lacey TITLE Prod. Secretary DATE 10-18-66

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side