

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse 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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 0117529
2. NAME OF OPERATOR KEEN 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 660' FWL & 660 FSL SEC. 21 UNIT M, SW 1/4 SW 1/4		8. FARM OR LEASE NAME FEDERAL 21
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.) TO BE FURNISHED LATER	9. WELL NO. 1
		10. FIELD AND POOL, OR WILDCAT CHAUEROO-SAN ANGELES
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 21-7S-336-NM NM
		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:

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.)*

SPUD: 3:00 PM, 10-3-66

DRILLED 8 3/4" HOLE TO 1810' AND CEMENTED
7" CASING AT 1810' W/ 375 SK CEMENT. PLUG DOWN
4:30 AM, 10-4-66. CEMENT CIRCULATED. TESTED
CASING TO 1000 PSI FOR 30 MINUTES EN 10-4-66;
HOLD OKAY.

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

SIGNED

Gay L. Gordon

TITLE

PRODUCTION SECRETARY

DATE

10-6-66

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

OCT 7 1966

J. L. GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side