

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side), C. 6-100

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 a well; back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. ☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR
Central Land Company

3. ADDRESS OF OPERATOR
415 First State Bank Building, Dallas, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1910 ENCL 1000' FEL Sec 25 T12N R 24E N41

14. PERMIT NO.
43215 GL

15. ELEVATIONS (Show whether OF, WT, GR, etc.)
43215 GL

5. LEASE DESIGNATION AND SERIAL NO.
NM 1008997-A

6. IF INDIAN, ALLOTED OR TRIBE NAME
923 M 1'66

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal 25

9. WELL NO.
9

10. FIELD AND POOL, OR WILDCAT
Cemented - San Antonio

11. SEC., T., R., M., O., BLK. AND SURVEY OR AREA
25 T12N R24E N41

12. COUNTY OR PARISH 13. STATE
ROBERTSON DALLAS

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 ☒	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.)*

7-21-66 CEMENTED 7" ZONE CASING AT 1823'. CEMENTED WITH
250 SX INCORPUS 8% GEL AND 100 SX INCORPUS
PLUS 2% CACI. PLUS DOWN 3:00 AM 7-21-66
CEMENT CIRCULATED.

7-22-66 TESTED CASING TO 1000 PSI FOR 30 MINUTES
HELD O.K.

WELL SPUD 1:30 PM 7-18-66

18. I hereby certify that the foregoing is true and correct
SIGNED Donald R. Kamm TITLE District Accountant DATE 7-22-66

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED

*See Instructions on Reverse Side

JUL 20 1966

J. L. GORDON
ACTING DISTRICT ENGINEER.