

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NA 0108207-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDAY NOV 15 11:40 AM '66 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 ☐

2. NAME OF OPERATOR

KERN COUNTY LAND CO.

3. ADDRESS OF OPERATOR

418 FIRST STATE BANK, MIDLAND, TEX.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FEDERAL 23

9. WELL NO.

12

10. FIELD AND POOL, OR WILDCAT

CHOCOMA-SAN ANTONIO

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

23-7S-33E-N.M.N.

14. PERMIT NO.

15. ELEVATIONS (Show whether DS, RT, GR, etc.)

660' FNL: 660 FGL SEC 23 UNIT 4 44/4 44/4
4351' AB

12. COUNTY OR PARISH

ROOSEVELT 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.)*

REACHED 4350' TD ON 10-31-66. LAN 4 1/2"
CASING TO 4350' AND CEMENTED WITH 350
SX CEMENT. PLUG DOWN 5:45 PM, 10-31-66.
TESTED CASING TO 2000 PSI FOR 30 MINUTES
HOLD O.K. ON 10-31-66.

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

SIGNED

W. J. Gordon

TITLE

PROD. SECRETARY

DATE

11-10-66

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

NOV 14 1966

J L GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side