

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

COPY TO O. C. C.

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE, EASE, OR OTHER RIGHT AND SERIAL NO.

6. LAND, MINERAL, OR TRIBE NAME

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 ☐

2.

NAME OF OPERATOR

KERN COUNTY LAND CO

3.

ADDRESS OF OPERATOR

418 FIRST STATE BANK MIDLAND, TEXAS

4.

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

14.

PERMIT NO.

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 COMPLETION

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 7:00 PM 7-31-66

CEMENTED 7" 20# CASING AT 1830' WITH 375 SX INCOR  
CEMENT. PLUG DOWN 8:00 PM 8-3-66. CEMENT  
CIRCULATED. TESTED CASING TO 1000 PSI FOR  
30 MINUTES- HELD O.K.

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

SIGNED

*Monard K. Kanan*

TITLE

DISTRICT ACCOUNTANT

DATE

8-5-66

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side

