

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Southern Petroleum Exploration, Inc.		8. FARM OR LEASE NAME Cities Service Federal	
3. ADDRESS OF OPERATOR P. O. Box 1434, Roswell, N. M. 88201		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 330' FN&EL's Sec. 13, Twp. 7-S, Rge. 34-E		10. FIELD AND POOL, OR WILDCAT Wildcat	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4260 GR	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA N.M.P.M. Sec. 13, Twp. 7-S, R 34-E	
		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	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	Commence Drilling Operations	<input type="checkbox"/>

(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 1:45 P.M. 3-25-69, Ran 312' 8-5/8", 24#, J-55, ST&C new Lonestar casing, cemented with 200 sacks 50-50 Posmic A Cement + 2% calcium chloride. Cement circulated. Plug down 8:00 P.M. 3-25-69. Waited 18 hours for cement to set. Tested casing w/1000# for 30 minutes. Held O.K.

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

SIGNED Re. Hish

TITLE District Manager

DATE 3-27-69

(This space for Federal or State office use)

APPROVED

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

MAR 27 1969

DATE

\*See Instructions on Reverse Side

J. L. GORDON  
ACTING DISTRICT ENGINEER