

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instruction  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0556301

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

-

7. UNIT AGREEMENT NAME

-

8. FARM OR LEASE NAME

Federal "B"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesignated

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

30-8S-36E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

4124.3 GL

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐  
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PULL OR ALTER CASING

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☐  
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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☐  
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REPAIRING WELL

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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(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.) \*

4-30-69: Ran 308 jts 5½", 17# & 15.5#, J-55 csg. 9868.49' set @ 9845' RKB.  
Cmt w/300 sx class C Poz w/2% gel, 3/4 of 1% CFR-2, 8# salt per sx.  
Plug down @ 1:40 PM. WOC 18 hrs. Press test to 1500# for 30 min.  
Test OK.

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

SIGNED

*Charles B. Read*

TITLE

Operator

DATE 5-1-69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

\*See Instructions on Reverse Side

MAY 1 1969  
J. L. GORDON  
ACTING DISTRICT ENGINEER