

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.NM-050476
6. IF INDIAN, ALLOTTEE 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	SOLSBERY Federal Oil COM
3. ADDRESS OF OPERATOR	8. FARM OR LEASE NAME
BOX 68, HOBBS, N. M. 88240	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT
660' FSL x 660' FEL Sec. 29 (Unit P, SE 1/4 SE 1/4)	TODD-LOWER SAN ANDRES
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	29-7-36 NM PM
R.D.B. 4137'	12. COUNTY OR PARISH 13. STATE
	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.)

On 12-21-69, 4 1/2" OD 9.5" J-55 Casing was set @ 4363' w/ 300 #4.
Incon meat. Tested casing w/ 2000 psi for 30 min.
Test O.K. After HOC appx. 48+ hours, perforated
interval 4305-19 w/ 2 1/2" SPF. Acidized w/ 4000 gal 20%
LSTNE. Evaluated.

PT. Swab: Flow 134 BO x 0 BW 24 hr. CPF 320.
GOR. NA. Cgr. 26.1°

TD - 4363'

PBD - 4346'

TPAY - 4305'

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

SIGNED

TITLE AREA SUPERINTENDENT

DATE 12-29-69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DEC 31 1969

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

OK 4- USGS- H
1- NSW
1- SUSP
1- RRY

1- FEATHERSTONS