

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE  
(Other instructions on reverse 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"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 038425
2. NAME OF OPERATOR Roger C. Hanks	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 2100 Wilco Building, Midland, Texas 79701	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  1980' FNL & 660' FEL	8. FARM OR LEASE NAME Nancy Federal
	9. WELL NO. 1
	10. FIELD AND POOL, OR WILDCAT Vada Penn
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1980' FNL 660' FEL Sec 28 T 8-S R36 E
14. PERMIT NO.	12. COUNTY OR PARISH Roosevelt
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4091 GR	13. STATE N.Mex.

18. 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 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"/>		<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.)\*

1. Spotted a 4 SX Cement Plug 8175-8140'
2. Spotted a 35 SX Cement Plug 6026
3. Spotted a 40 SX Cement Plug 5550
4. Spotted a 40 SX Cement Plug 4106
5. Spotted a 60 SX Cement Plug 1023
6. Spotted a 65 SX Cement Plug 410
7. Spotted a 10 SX Cement Plug TOP
8. Dry Hole Marker Erected-Plugged 5-9-73

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

SIGNED

*Sam R. Johnson* TITLE *Office Mgr*

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JAN 15 1975 DATE

MAURICE R. BROWN

# CACTUS CASING PULLING INC.



HODGES, NEW MEXICO 88240  
BOX 1102  
202 W. BROADWAY PL.  
PHC — OFFICE 505 393-2302  
MOBILE 505 393-7274  
NITES 505 393-7949

TEXAS OPERATIONS  
HOUSTON — P. O. BOX 24110  
PHONE 713 872-0531  
MIDLAND — 402 1ST NAT'L. BANK BLDG.  
PHONE 915 683-1830

DATE 5/9/73

## CEMENTING AFFIDAVIT

COMPANY

Rogers C. Shanks

LEASE

Mercury Federal #1

SECTION

28

TOWNSHIP

85

RANGE

31E

COUNTY

Prescott

6027 FT. OF

5 1/2

CASING RECOVERED

10123 FT. OF

8 5/8

CASING RECOVERED

### PLUGS SET

C10P4

1. 4 SACKS CEMENT SET AT 8175 FT. - TO 8140 FT.
2. 35 SACKS CEMENT SET AT 6026 FT. - TO \_\_\_\_\_ FT.
3. 40 SACKS CEMENT SET AT 5550 FT. - TO \_\_\_\_\_ FT.
4. 40 SACKS CEMENT SET AT 4106 FT. - TO \_\_\_\_\_ FT.
5. 60 SACKS CEMENT SET AT 1023 FT. - TO \_\_\_\_\_ FT.
6. 65 SACKS CEMENT SET AT 410 FT. - TO \_\_\_\_\_ FT.
7. 10 SACKS CEMENT SET AT \_\_\_\_\_ FT. - TO Top FT.
8. \_\_\_\_\_ SACKS CEMENT SET AT \_\_\_\_\_ FT. - TO \_\_\_\_\_ FT.

CACTUS CASING PULLING, INC.

SIGNED

[Signature]

TITLE

Pres -