

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 05854

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal Trigg

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 18, T-10S, R-30E

12. COUNTY OR PARISH

Chaves

13. STATE

N.M.

1.

OIL WELL ☐ GAS WELL ☐ OTHER ☒ Drilling

2. NAME OF OPERATOR

The Atlantic Refining Company

3. ADDRESS OF OPERATOR

P. O. Box 1978, Roswell, New Mexico

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

At surface

660' FSL, 1980' FWL (Unit N)

14. PERMIT NO.

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

4023' DF

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.)*

Drilled 7-7/8" hole to 3370' T.D. A core of the Slaughter zone and logs proved the well to be non-productive. We propose to P & A the well in the following manner.

25 sx from 3270' - 3370'
25 sx from 2610' - 2710' (Top of San Andres)
25 sx from 1350' - 1450' (Yates)
25 sx from 240' - 330' (Bottom of surface casing)
10 sx from 10' - 40'.

11# mud will be used to spot plugs.

Verbal permission obtained from Mr. Shoger on 7/13/65.

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

SIGNED

D. D. Brookes

TITLE

District Drilling Supervisor

DATE

7-14-65

(This space for Federal or State office use)

APPROVED BY

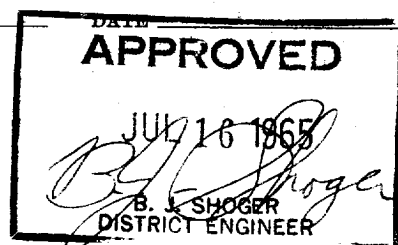
CONDITIONS OF APPROVAL, IF ANY:

TITLE

NMOCC - ARTESIA
NMOCC - HOBBS
BLM - SANTA FE

☐
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☐

*See Instructions on Reverse Side



Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

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Chaves

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N.M.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug a well in a different reservoir.
Use "APPLICATION FOR PERMIT TO DRILL" for such proposals.)

1.

OIL WELL ☐ GAS WELL ☐ OTHER ☒ **Drilling**

2. NAME OF OPERATOR

The Atlantic Refining Company

3. ADDRESS OF OPERATOR

P. O. Box 1978, Roswell, New Mexico

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

660' PSL, 1980' FWL (Unit N)

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4023' DF

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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 ☐

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SIGNED

B. J. Shoger

TITLE

District Drilling Supervisor

DATE

7-14-65

(This space for Federal or State office use)

APPROVED BY

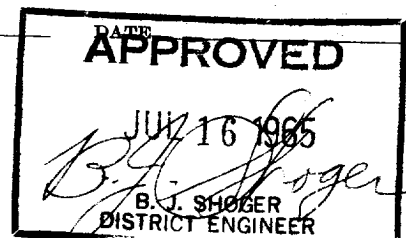
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NMOCC - HOBBS
BLM - SANTA FE**

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Spud

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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ALTERING CASING

SHOOTING OR ACIDIZING

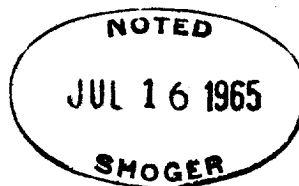
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Moved in and rigged up rotary tools. Spudded well at 9:30 P.M. 6/30/65. Drilled 12-1/4" hole to 310'. Ran 9 joints of 8-5/8" OD 8R 24# J-55 casing with guide shoe and float collar = 292.79'. Set at 302.44' RKB. Cemented w/200 sx of Incer + 2% CaCl. Plug down at 4:10 A.M. 7/1/65. Cement circulated.



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

SIGNED

C.D. Spetke

TITLE

District Drilling Supervisor

DATE

July 14, 1965

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

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