

UNITED STATES

SUBMIT IN TRIPLI
(Other instructions
verse side)E-
re-Form approved.
Budget Bureau No. 42-R1424.NM0000 - ARTESIA
NM0000 - LINDS
BLM - SANTA FEDEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

5. LEASE DESIGNATION AND SERIAL NO.

NM-027395

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

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8. FARM OR LEASE NAME

Pubco Federal

9. WELL NO.

#14

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 33-T8S-R31E

12. COUNTY OR PARISH

Chaves

13. STATE

N.M.

1. OIL WELL ☐ XX GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Pubco Petroleum Corporation

3. ADDRESS OF OPERATOR

P. O. Box 869, Albuquerque, New Mexico 87103

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

1650' fSL, 1980' fEL, Sec. 33-T8S-R31E

14. PERMIT NO.

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

4268 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.)*

Cemented 11 jts. of 8-5/8", 24#, J-55 csg. @ 358' w/275 sax reg. plus 2% CaCl.
Plug down 2:45 A.M. 9/4/66. WOC 24 hrs. Press. tested to 800 psi. O.K.

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

ORIGINAL SIGNED BY
SIGNED CHARLES RAMSEY, JR.
Charles E. Ramsey, Jr.TITLE Area Production ManagerDATE September 29, 1966

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side