

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIP  
(Other instruction  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

N. M. Serial # 025585

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

11/66

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Shell Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 3, T 9-S, R 30-E

12. COUNTY OR PARISH

Chaves

13. STATE

N. Mex.

## 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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Ashmun &amp; Hilliard

3. ADDRESS OF OPERATOR

710 Vaughn Building, Midland, Texas 79701

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

Unit "A", 660' from North and East lines

14. PERMIT NO.

not assigned

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

4140' GL

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.)\*

Well spudded @ 6:00 p.m. on 8/12/66.

Ran 9 jts. 8 5/8" casing. Set @ 297'. Cemented with 285 sx regular Neat  
2% calcium chloride.

Circulated cement. WOC for 12 hrs.

Tested to 1000# for 30 minutes. Held OK.

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

SIGNED

TITLE Production Superintendent

DATE August 17, 1966

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

19 1966

\*See Instructions on Reverse Side