

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions
verse side)Form approved.
Budget Bureau No. 42-R1424.MINES - 10000
WELLS - 10000
SANTA FE

SECONDARY 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.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

12. COUNTY OR PARISH 13. STATE

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

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

14. PERMIT NO.

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

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.)*

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

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

OCT 3 1967

*See Instructions on Reverse Side

OCT 3 1967

J. W. SUTHERLAND
DISTRICT ENGINEER



LTR



Job separation sheet

NMOCC - ARTESIA
NMOCC - HODDS
BLM - SANTA FEUNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☐	DRY ☒	Other ☐												
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐										
2. NAME OF OPERATOR H. L. Brown, Jr.						7. UNIT AGREEMENT NAME											
3. ADDRESS OF OPERATOR 704 Vaughn Building, Midland, Texas						8. FARM OR LEASE NAME Federal-6											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' FSL & 2310' FSL of Sec. 6, T-9-S, R-30-E At top prod. interval reported below At total depth Same						9. WELL NO. 1											
14. PERMIT NO.						10. FIELD AND POOL, OR WILDCAT Wildcat											
DATE ISSUED						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 6, T-9-S, R-30-E											
15. DATE SPUDDED 12/21/66						12. COUNTY OR PARISH Chaves											
16. DATE T.D. REACHED 12/27/66						13. STATE New Mexico											
17. DATE COMPL. (Ready to prod.) Day						19. ELEV. CASINGHEAD											
20. TOTAL DEPTH, MD & TVD 3274'		21. PLUG, BACK T.D., MD & TVD 3227'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-3274'	24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None										
25. WAS DIRECTIONAL SURVEY MADE No						26. TYPE ELECTRIC AND OTHER LOGS RUN Western Company Geosatron Log											
27. WAS WELL CORED No						28. CASING RECORD (Report all strings set in well)											
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED							
8-5/8"		20#		223'		10-1/4"		180 sacks cement		None							
4-1/2"		9.5#		3274'		7-7/8"		200 sacks cement									
29. LINER RECORD						30. TUBING RECORD											
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)			
None										2"		3250'					
31. PERFORATION RECORD (Interval, size and number) Casing notch at 3258'						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.											
						DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED									
						3258'		2896 gallons of 15% HCL Acid									
33.* PRODUCTION																	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)											
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		WATER—GAL.		GAS OIL RATIO			
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—GAL.		OIL GRAVITY-API (CORR.)					
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY											
35. LIST OF ATTACHMENTS Log mailed previously						36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records											
SIGNED R. Busby						TITLE Agent						DATE October 2, 1967					

*(See Instructions and Spaces for Additional Data on Reverse Side)

ACCEPTED FOR RECORD

J. N. Suthalms
District Engineer

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws 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. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH
				Asphdrite	908'	
				Tubos	1940	
				Queen	2095	
				San Andres	2536	
				P1	3078	
				Slaughter	3238	