

NMCCC COPY
UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLIC.
(Other instructions on
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM - 0346362

6. IF INDIAN, ALLOTTEE OR TRIBE-NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Woodman Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Cato - San Andres

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

12. COUNTY OR PARISH 13. STATE

Chaves

NM

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

Sun Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 1861 - Midland, Texas 79702

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

Sec. 28 - T8S - R30E
1980' FNL & ~~660' FNL~~ 1980/W

14. PERMIT NO.

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

4142 GR

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) Return To Production

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) (Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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 perti-
nent to this work.)*

1. Miru

2. Clean hole, run tbg & seat nipple.

3. Run rods & insert pump.

4. Test

RECEIVED

MAY 30 1978

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Production Staff Associate DATE 5-26-78

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE

MAY 31 1978

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
JUN - 1 1978
O.C.C.
ARTESIA, OFFICE