

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

NMOCC - ARTEZIA

NMOCC - HOBBS

BLM - SANTA FE

SUMMARY 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 ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 0346362
2. NAME OF OPERATOR Sun Oil Company		6. LANDMAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 2792, Odessa, Texas 79760		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL and 660' FEL of Sec. 29		8. NAME OF LEASE NAME Goodman-Federal
14. PERMIT NO.		9. WELL NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4115' Gr.		10. FILL AND POOL OR WILDCAT Gate S. A. Est.
		11. SEC. T. R. S. OR BLM. AND SURVEY OR AREA Sec. 29, T8S, R30E
		12. COUNTY OR PARISH Chaves
		13. STATE New Mexico

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) ☐

Completion

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENTS ☐(NOTE: Report results of multiple completion of well
Completion or Recombination 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.)*

1-4-68 pulled tubing and packer. Ran 109 jts. 2 3/8" tubing, 4.75" 1-55" set at 3422'. Ran rods and pump. Set base and unit. Tied in electricity. Moved for rig and respaced rods, started pumping. On 24 hour potential test ending at 11-68 pumped 23 barrels oil, 40 barrels water, GOR TSTM, Gravity 26.8° API corr.

RECEIVED

JAN 15 1967

U. S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED

P. E. Happel

TITLE

Area Engineer

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

J. N. Sutherland

Dist:

*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, of 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.

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 7: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

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DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SURVEY NOTICES AND REPORTS ON WELLS

1. NAME OF OPERATOR
2. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
3. ELEVATION (Show whether in ft., m., etc.)
4. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER ACTION
5. WATER SHOWN
6. FRACTURE TREATMENT
7. SHOOTING OR FLARING
8. OTHER (Specify)

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