| | Form 9-331 (May 1963) UN TO STATES SUBMIT RIPL 'E' OCTIONS PARTESIA GEOLOGICAL SURVEY | | | | Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. NM 0155494 A | | |
|----------------|---|-------------------------------|---|---|--|--|--|
| | | | | | | | |
| NMOSC Blm - | SERVED SUPPRY 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.) | | | | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| | | | | | | | |
| | OIL GAS OTHER OTHER | | | | 7. UNIT AGREDMENT NA | 7. UNIT AGREEMENT NAME | |
| | 2. NAME OF OPERA | 2. NAME OF OPERATOR | | | | 8. FARM OR LEASE NAME | |
| | SINCLAIR OIL & GAS COMPANY 3. ADDRESS OF OPERATOR | | | | | Winkler Federal | |
| | | | | | 9. WELL NO. | | |
| | P. O. Box 1920, Hobbs, New Mexico 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) | | | | | 10. FIRLD AND POOL, OR WILDCAT | |
| | At surface 1980 | fr the S | Cato San Andres 11. SBC., T., E., M., OR BLK. AND SURVEY OR AREA 29-T8S-R30E | | | | |
| | 14. PERMIT NO. 15. ELEVATIONS (Show whether DE DE CO. ode.) | | | | | | |
| | 14. PERMIT NO. | | 15. ELEVATIONS (Show whether I | OF, RT, GR, etc.) | 12. COUNTY OR PARISH | | |
| | 16. Charle Amazoniata Bay Ta Indianta No. (Alice D | | | NI. (NI. 6 | Chaves New Mexico | | |
| | Notice of Appropriate Box to Indicate Nature of Notice, Report, or O | | | | | | |
| | TEST WATER SI | | PULL OR ALTER CASING | | UENT REPORT OF: | [| |
| | FRACTURE TREA | | MULTIPLE COMPLETE | WATER SHUT-OFF FRACTURE TREATMENT | REPAIRING W | | |
| | SHOOT OR ACIDI | ZB | ABANDON* | SHOOTING OR ACIDIZING | ABANDON MEN | r• | |
| | REPAIR WELL CHANGE PLANS (Other) | | | (Other) Spud, set s | of multiple completion a | m 197 all | |
| | 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If we'll is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) | | | | | | |
| | 12-13-67 | to 285'. Incor Cla Cement Cir | 2-1/4" hole 11:30 AM] Ran 8-5/8"OD 20# SF-4 ss C plus 2% Ca. Chl. rculated to surface. tested casing to 800# | O casing set @ 285' a plus 1/4#Flocele per. WOC 24 hrs. | and cemented w/2 sk. Slurry Wt | 00 sks. | |
| | | | | | A Company of the Comp | | |
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| | | | | | 이 17 전 1 - 17 분 기 년 교 17 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 | 2 | |
| | | | | | | | |
| | | 4 | | | | | |
| | / | $\langle \hat{C} \rangle$ | ·) | | | | |
| | 18. I hereby certify | that the foregoin | g is true and correct | | 3 | | |
| | SIGNED | w/#tr | TITLE | Superintendent | DATE 12-1 | 5-67 | |
| | (This space for l | Federal or State | office use) | | | 4 * * * * * * * * * * * * * * * * * * * | |
| | APPROVED BY | | TITLE | | The state of the s | · · · · · · · · · · · · · · · · · · · | |
| | CONDITIONS OF | F APPROVAL, IE | ANY: | | JATE STATE | | |
| ACCEP | TED FOR RECOR | | | · | ROSWELL IN W | down A. Lanco | |

*See Instructions on Reverse Side

District Orig&4cc: USGS Roswell, N.M. cc: Regifial Office, cc: file