

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

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.)

<p>1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR Occidental Petroleum Corporation</p> <p>3. ADDRESS OF OPERATOR 306 WALL TOWERS EAST, MIDLAND, TEXAS 79701</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 660' FWL</p> <p>14. PERMIT NO.</p>	<p>5. LEASE DESIGNATION AND SERIAL NO. NM 8255</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME GOVERNMENT 15</p> <p>9. WELL NO. 1</p> <p>10. FIELD AND POOL, OR WILDCAT WILDCAT</p> <p>11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA SEC. 15-T14S-R30E</p> <p>12. COUNTY OR PARISH CHAVES</p> <p>13. STATE NEW MEXICO</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3881' G. L.</p>	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data:

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) 7 CASING	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>	(Other)	<input type="checkbox"/>

(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 and 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.)*

4/16/71: ENCOUNTERED SALT WATER AT 1155'. RAN 7" CASING TO 1326'
CASING SET WITH NO CEMENT. TESTED CASING AFTER SETTING.
WATER SHUTOFF ACHIEVED. (IT IS ANTICIPATED THAT THIS
CASING WILL BE PULLED SUBSEQUENT TO PLUGGING AND ABANDONING OR COMPLETION OF THE TEST).

RECEIVED

APR 20 1971

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED J. M. McCall TITLE AGENT

DATE 4/19/71

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD PURPOSES
APR 20 1971
Date
ACTING District Engineer

*See Instructions on Reverse Side

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APR 23 1971

OIL CONSERVATION COMM.
HOBBS, N. M.

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APR 23 1971

OIL CONSERVATION COMM.
HOBBS, N. M.