

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42 R1424.
LEASE DESIGNATION AND SERIAL NO.

NM 15678

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 **Water Disposal Well**

2. NAME OF OPERATOR
Sundance Oil Company

3. ADDRESS OF OPERATOR
Drawer I, Artesia, New Mexico 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980 From South Line, 660 From East Line

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4256.5' GR

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Ingram Federal

9. WELL NO.
#2

10. FIELD AND POOL, OR WILDCAT
Tom Tom San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 5 Twn8S Rge31E

12. COUNTY OR PARISH 13. STATE
Chaves NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) **Water Disposal Well**

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

(Other) ☐

(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.)*

Intend to covert well to a water disposal well.

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

SIGNED W. D. Morgan

TITLE **Supt. Permian Basin Area** DATE **1-23-76**

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____