

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0558018

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

UNION FEDERAL

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 1 - 8S - 31E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

1. OIL ☒ GAS ☐ OTHER ☐
WELL ☒ WELL ☐

2. NAME OF OPERATOR

FRANKLIN, ASTON & FAIR, LTD.

3. ADDRESS OF OPERATOR

P. O. Box 1090, Roswell, New Mexico 88201

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

660' FNL & 660' FWL

Section 1 - 8S - 31E

14. WELL NO.

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

4379.9 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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Set Production Casing

(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.*

On November 7, 1975 4 1/2" N-80 casing was set at 10,625' with 500 sacks class "H" cement.

RECEIVED

NOV 14 1975

O. C. C.
ARTESIA, OFFICE

RECEIVED

NOV 11 1975

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Grant M. Smith

TITLE

Geologist

DATE

10-10-75

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side