

NMOCC CORP
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on
reverse side)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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Shell Oil Company	8. FARM OR LEASE NAME Corder Federal
3. ADDRESS OF OPERATOR P. O. Box 1509, Midland, Texas 79702	9. WELL NO. 9
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 1980' FEL	10. FIELD AND POOL, OR WILDCAT Cato San Andres
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4108.9
	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:		SUBSEQUENT REPORT OF	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Casing & cement - Test <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 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.)*

Spudded @ 5:00 p.m. 8-1-77

Ran 7 jts 8 5/8" 35# K-55 csg. Cmt'd @ 253' w/150 sx Class C + 2% CaCl₂.
Bumped plug w/1000 psi for 30 minutes - no pressure drop.

Option 2:

1. 198 cu ft
2. Class C + 2% CaCl₂
3. 60°
4. 62°
5. 1000 psi
6. 8 hrs

Ran 87 jts 5 1/2" csg & set @ 3500' w/2285 sx (Howco) lite + 1/4# floccul/sack +
295 sx Class C. Circ 295 sx to surface.
On test well produced 0 B0, 14 BW, TSTM gas. Well TA pending evaluation.

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

SIGNED

J. D. D'Agostino

TITLE

J. D. D'Agostino

Senior Drilling Engineer

DATE 10-21-77

(This space for Federal or State office use)

APPROVED BY

Lee A. Lara

TITLE

ACTING DISTRICT ENGINEER

DATE

NOV 10 1977

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