

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON **WELLS RECEIVED**

(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"/>		FEB 7 1978		5. LEASE DESIGNATION AND SERIAL NO. NM-15015-A	
2. NAME OF OPERATOR SUNDANCE OIL COMPANY		O. C. C. ARTESIA, OFFICE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Suite 510, 1776 Lincoln St., Denver, CO 80203				7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL and 1980' FWL Unit N				8. FARM OR LEASE NAME Oakason Federal	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4285' KB, 4275' GR		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 Section 33, T. 7S., R. 31E.	
				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) SET PRODUCTION CASING <input checked="" 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.)*

Drilled to TD of 4015'. Ran 126 jts. of 4½" JCW-36, 11.60# production casing. Set at 4013'. Cemented w/300 sx 50/50 Pozmix, Class C w/¼# flowseal, 8# salt, 2% gel. Pressured up to 2000# OK. Plug down at 5:30 a.m. 1/21/78. Released rig. WOCU.

RECEIVED
FEB 3 1978
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED Richard O. Dimit TITLE Chief Engineer

DATE February 1, 1978

(This space for Federal or State office use)

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE DISTRICT ENGINEER

DATE FEB 3 1978

RECEIVED

FEB 9 1978

OIL CONSERVATION COMM.
HOBBS, N. M.