

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE  
(Other instructions on re-  
verse 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<br>SUNDANCE OIL COMPANY  |  | 8. FARM OR LEASE NAME<br>Oakason Federal                                |  |
| 3. ADDRESS OF OPERATOR<br>Suite 510, 1776 Lincoln St., Denver, CO 80203  |  | 9. WELL NO.<br>3  |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)<br>At surface<br>660' FSL, 660' FWL Unit M |  | 10. FIELD AND POOL, OR WILDCAT<br>Tom Tom San Andres                    |  |
| 14. PERMIT NO.   |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Section 33-T7S-R31E |  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>4278.4 GL  |  | 12. COUNTY OR PARISH<br>Chaves  |  |
|  |  | 13. STATE<br>New Mexico   |  |

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MAY 15 1978

D. C. C.  
ARTESIA, OFFICE

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

## NOTICE OF INTENTION TO:

|                     |                          |                      |                          |
|---------------------|--------------------------|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | PULL OR ALTER CASING | <input type="checkbox"/> |
| FRACTURE TREAT      | <input type="checkbox"/> | MULTIPLE COMPLETE    | <input type="checkbox"/> |
| SHOOT OR ACIDIZE    | <input type="checkbox"/> | ABANDON*             | <input type="checkbox"/> |
| REPAIR WELL         | <input type="checkbox"/> | CHANGE PLANS         | <input type="checkbox"/> |
| (Other)             | <input type="checkbox"/> |                      | <input type="checkbox"/> |

## SUBSEQUENT REPORT OF:

|                               |                                     |                 |                                     |
|-------------------------------|-------------------------------------|-----------------|-------------------------------------|
| WATER SHUT-OFF                | <input type="checkbox"/>            | REPAIRING WELL  | <input type="checkbox"/>            |
| FRACTURE TREATMENT            | <input type="checkbox"/>            | ALTERING CASING | <input type="checkbox"/>            |
| SHOOTING OR ACIDIZING         | <input type="checkbox"/>            | ABANDONMENT*    | <input type="checkbox"/>            |
| (Other) SET PRODUCTION CASING | <input checked="" type="checkbox"/> |                 | <input checked="" 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 4016'. Ran logs. Circulated 1½ hrs. Ran 128 jts. of 4½", 11.6# production casing. Landed at 4016'. Cemented w/300 sx 50/50 Poz, Class C mixed w/2% gel, ½# floeal, 8# salt, 2% CaCl. Plug down at 4:45 p.m. 5/7/78. Pressured to 1200#, plug held okay. Released rig at 6 p.m. 5/7/78. WOCU.

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U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

Richard O. Dimit

TITLE Vice President, Production

DATE May 8, 1978

(This space for Federal or State office use)

APPROVED BY

Joe J. Lara

TITLE

ACTING DISTRICT ENGINEER

DATE

MAY 12 1978

CONDITIONS OF APPROVAL, IF ANY:

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ILL. CONSERVATION COMM.  
HOBBS, IL. 61.