

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATA  
(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 <input checked="" type="checkbox"/> GAS <input type="checkbox"/> WELL WELL OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-15015-B
2. NAME OF OPERATOR SUNDANCE OIL COMPANY		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 1980' FNL and 1980' FWL Unit F		8. FARM OR LEASE NAME Oakason Federal "B"
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4292.4' GL		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:

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"/>	

## 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"/>	

(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 3993'. Ran 9 jts., 11.6#, 4½" casing and 92 jts., 10.5#, 4½" casing. Set at 3993'. Cemented w/300 sx 50/50 Poz mixed with 2% gel, ¼# floe, 8# salt. Plug down at 6:30 a.m. 6/10/78. Pressured up to 1300#, held okay. WOCU

**RECEIVED**  
 JUN 15 1978  
 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 June 12, 1978

(This space for Federal or State office use)

APPROVED BY

Joe G. Lara

TITLE ACTING DISTRICT ENGINEER

DATE JUN 23 1978

CONDITIONS OF APPROVAL, IF ANY: