

N.M.O.C.D. COPY
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.

USA NM 15677

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

7. UNIT AGREEMENT NAME

APR 07 1981

8. FARM OR LEASE NAME

Hahn Federal ARTESIA OFFICE

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Tom-Tom San Andres

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

Sec 27, T-7-S, R-31-E

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

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 GAS WELL OTHER

2. NAME OF OPERATOR
Flag-Redfern Oil Company

3. ADDRESS OF OPERATOR
P.O. Box 2280, Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
990' FWL and 330' FSL

14. PERMIT NO. -----

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4339 GR

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) <u>Surface casing</u> <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 1473'. Ran 33 jts 8 5/8" 24#/ft K-55 STC casing and set at 1473'. Cemented with 550 sx Halliburton Light, 0.25# Flocele, 8# Salt followed by 200 sx C1 "C", 2% Gel, Plug down at 1:00AM 3-3-81. Circ 100 sx to surface. WOC 18 hrs. NU BOP. Test Surface casing to 1000 psi for 15 minutes.

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

SIGNED Peter W. Chester TITLE Engineer DATE 3-30-81

ACCEPTED FOR RECORD
PETER W. CHESTER
APR 6 1981
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

(This space for Federal Approval, if any.)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY _____

See Instructions on Reverse Side

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APR 13 1981

OIL CONSERVATION DIV.