JINITED STATES SUBMIT IN TRIPLICATES

		Form : Budget	approv Bures	ed. au N	o. 42-I	11424
5.	LEASE	DESIG:	MOITA	AND	SERIAL	NO.

(May 1963) DEPARTN	'T OF THE INTERI	OR terse side)		Budget Bureau		
— — · · · · · · · · · · · · · · · · · ·	EOLOGICAL SURVEY	· · · · · · · · · · · · · · · · · · ·	Las C	cruces 069	051	
SUNDRY NOTION (Do not use this form for proposa Use "APPLICA"	6. IF INDI	6. IF INDIAN, ALLOTTEE OR TRIBE NAME				
1. OIL V GAS	7. UNIT A	7. UNIT AGREEMENT NAME				
WELL A WELL OTHER 2. NAME OF OPERATOR		1	8. FARM C	R LEASE NAME		
McAlester Fuel C	ompany			Mexico-Fee	deral 🎓	
3. ADDRESS OF OPERATOR		JUNE 1966	9. WELL	10.		
P. O. Box 210, M 4. LOCATION OF WELL (Report location cle	Magnolia, Arkansas		- 10	1	with DCAT	
See also space 17 below.) At surface	arry and in accordance with any	orace requirements.	10. FIELD AND POOL, OR WILDCAT			
	11. SEC.,	Gladiola (Devonian) 11. 880, T., E., M., OR BLE. AND				
660 feet from the Sou		_	*01	LVEY OR AREA		
the East line, Section	n 6, Township 12 Sou	th, Range 30 East	Sec. 6	6, T 12S, R	38 e	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF	12. COUNT	TY OR PARISH			
	3888 D.F.	Lea		New Mexico		
16. Check Ans	oropriate Box To Indicate N	lature of Notice, Report, o	r Other Date			
	Check Appropriate Box To Indicate Nature of Notice, Report, or O					
	لتكت					
-	ULL OR ALTER CASING	WATER SHUT-OFF		REPAIRING WE	·	
	ULTIPLE COMPLETE	FRACTURE TREATMENT SHOOTING OF ACIDIZING		ABANDONMENT		
\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	HANGE PLANS	(Other)	٠.	202		
(Other)		(NOTE: Report res Completion or Reco	ults of multiple	completion or	Well	
T.D. 12,006'. $5\frac{1}{2}$ " can well was producing of On April 23, well succellapsed at 7718'. roller and bumper subtract off $5\frac{1}{2}$ " of Plan to wash over and Plan to rerun $5\frac{1}{2}$ " cas pack off assembly and	il allowable 30% salddenly began produci Attempted to roll of (total 7.65') in heasing at 7650. Pull cut off collapsed sing and reconnect t	t water from performing mud. Pulled purpout casing at 7718 cole. I and recover casing casing. Remove from sections together	np and for and lost ng. om hole.	und casin	12,001'.	
(This space for Federal or State office	TITLE	Chief Engineer	The Control of the Co	N E D	-/66	
APPROVED BY	TITLE	TA A	DA M	rk		

*See Instructions on Reverse Side