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.

HOBBS OFFICE O.C.C. JAN 11 13 PM '66

RECEIVED
JAN 10 1966
U. S. GEOLOGICAL SURVEY
HOBBS, 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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC [illegible]

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☐ GAS WELL ☐ OTHER Injection Well

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR: [illegible] Oil Company

8. FARM OR LEASE NAME: [illegible] Unit

3. ADDRESS OF OPERATOR: Box 160 - Hobbs, New Mexico

9. WELL NO.: [illegible]

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

1980' FSL & 660' FWL, Section [illegible], T[illegible], R[illegible], [illegible] County, New Mexico, NMPM

10. FIELD AND POOL, OR WILDCAT: [illegible]

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: [illegible]-17-32

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): [illegible]

12. COUNTY OR PARISH: [illegible]

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	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) [illegible]			X
(Other)							

(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.)*

The subject well was cleaned out using the following procedure:

BEFORE: TD 4125' [illegible]
PAT: San Andres (3[illegible]-[illegible]') OH
WORK DONE: Released p[illegible]r and [illegible] 2[illegible] tbg. [illegible] 110 jts 2-1/2" tbg to [illegible]. Cleaned out [illegible] [illegible] [illegible] 2-1/2" tbg w/[illegible]. Ran 113 jts 2" [illegible] w/Guib tension p[illegible] and set at 3502'.
AFTER: TD 4125'
PAT: San Andres (3517-4125') OH
Injected 1,000 BW in 17 hours at 1350#
Workover Started: 12-2[illegible]-65 Completed: 12-29-65

ILLEGIBLE

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

SIGNED [signature] TITLE Staff Supervisor DATE 1-6-66

(This space for Federal or State office use)

APPROVED BY ______ TITLE ______ DATE ______

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
JAN 10 1966
J. L. GORDON
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

[illegible] 5, [illegible]