

COPY TO O. C. C.  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE  
(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.)

<p>1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR <b>Cities Service Company</b></p> <p>3. ADDRESS OF OPERATOR <b>P.O. Box 1919 Midland, TX 79702</b></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  <b>660 FNL &amp; 660 FEL Sec 30-T17S-R33E Lea County, New Mexico</b></p> <p>14. PERMIT NO.</p>	<p>5. LEASE DESIGNATION AND SERIAL NO. <b>LC - 062004</b></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME <b>SMGSAU</b></p> <p>8. FARM OR LEASE NAME <b>Tract 2</b></p> <p>9. WELL NO. <b>4</b></p> <p>10. FIELD AND POOL, OR WILDCAT <b>Maljamar (G-SA)</b></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 30-T17S-R33E</b></p> <p>12. COUNTY OR PARISH <b>Lea</b></p> <p>13. STATE <b>New Mexico</b></p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>4085' GR</b></p>	

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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) <b>Witnessed casing leak</b>	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	<input type="checkbox"/>

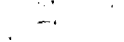
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*  
**survey & identification of above ground connections from casingheads.**

Dug out cellar. Installed riser to surface from one valve on each casinghead. Installed a second valve on each riser above ground and properly identified each. Backfilled cellar. Witnessed by Mrs. Wenny Kelly with USGS.

**RECEIVED**  
**MAR 26 1979**  
**U. S. GEOLOGICAL SURVEY**  
**HOBBS, NEW MEXICO**

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

SIGNED <u><i>E. J. Fulkerson</i></u>	TITLE <u>Region Operations Mgr.</u>	DATE <u>3/22/79</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	
CONDITIONS OF APPROVAL, IF ANY:		



APR 30 1969  
OIL CONSERVATION COM. 1  
HOUST. N. M.