

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions
reverse side)

Form approved.
Budget Bureau No. 42-15424
5. LEASE DESIGNATION AND SERIAL NO.
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mobil Oil Corporation		8. FARM OR LEASE NAME Sivley-Federal	
3. ADDRESS OF OPERATOR P. O. Box 633, Midland, Texas 79701		9. WELL NO. 3	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface: 2310 343 2300' FWL and 375' FSL		10. FIELD AND POOL, OR WILDCAT E-K Yates 7 Rivers Queen	
14. PERMIT NO.		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 19 T-18S, R-34E	
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3956 GL		12. COUNTY OR PARISH Lea	
		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) ☐	
(Other) ☐	Recomplete ☒	(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.)*

4735' ID. Penrose perfs 4708 - 4718.

Pull rods and pump. Clean out. Isolate Penrose formation and perforate and frac main Owen pay. Perf. at 4471-79.

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

SIGNED John J. Hunt TITLE Authorized Agent DATE May 9, 1967

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

APPROVED
MAY 15 1967
DISTRICT ENGINEER