

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)Budget Bureau No. 42 R1424
5. LEASE DESIGNATION AND SERIAL NO.

NM 2843-A

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 well to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR
Inexco Oil Company

3. ADDRESS OF OPERATOR
1100 Milam Bldg., Suite 1900, Houston, Texas 77002

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980' FNL & 660' WL
Unit Letter E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3659.4 GR

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal Com. 7

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
West Tonto Penn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 7, T-19S, R-33 E

12. COUNTY OR PARISH
Lea

13. STATE
N. Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐

Add perforations

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

X

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.)*

8/10/79 perforated with Welex 13236-40'; 13311-16'; 13330-38' w/2
shots per foot.

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

SIGNED

A. K. Hudsons

TITLE

Chief Clerk

DATE 8/21/79

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

3 - USGS-Hobbs

1 - State of N.M.-Hobbs (info only)

1 - T. Sheets

*See Instructions on Reverse Side

1 - G. DeBord

1 - File