

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Federal NM-25513

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.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Pe-Je-An Federal

9. WELL NO.

One (1)

10. FIELD AND POOL, OR WILDCAT

Wolfcamp/Wildcat

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 26, T18S, R32E

12. COUNTY OR PARISH

Lea

13. STATE

N.M.

1. OIL ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

JFG ENTERPRISE

3. ADDRESS OF OPERATOR

P. O. Box 100, Artesia, New Mexico 88211-0100

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surfaceUnit Letter K, 1980' from the South line and 1980'
from the West line, Section 26, T18S, R32E, N.M.P.M.

14. PERMIT NO.

API#30-025-2956

15. ELEVATIONS (Show whether DF, RT, GE, etc.)

3742' G. L.

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) Drill Stem Test ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(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 perti-
nent to this work.)*

3-18-86 4:00 P.M. Ending time 2:00 P.M. on 3-19-86

9325 ft. to 9400 ft.

Hydr. In	4224	4288
I FF) 30 min.	21	91
FF)	21	91
ISIP - 1 Hr.	1063	1045
IF)	43	93
FF) - 90 min.	64	114
FSI - 180 min.	809	864
Hydr. Out	4224	4288

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APR 4 1986

CARISBAD, NEW MEXICO

Surface Pressure 0 to a few bubbles at end of initial flow

Initial Shut In Period 60 min.

Final Flow Period 90 min. No Blow to weak blow to a bubble with hose
submerged 4" in bucket.

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

SIGNED

TITLE Partner

DATE 4/2/86

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE