

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions
verse side)

Form approved
Budget Bureau No. 42-B1494

5. LEASE DESIGNATION AND SERIAL NO.

LC-064790 (Non-Unit)

6. IF INDIAN, ALLOTTEE OR TRUST NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal 18

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

West Tonto-Yates-7 Rivers

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

Sec. 18-19S-33E

12. COUNTY OR PARISH 13. STATE

Lea

N. M.

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 ☐

2. NAME OF OPERATOR

J. H. C. Production Company

3. ADDRESS OF OPERATOR

P. O. Drawer II, Artesia, New Mexico 88210

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

1980' from north and 2039' from west lines of
Section 18-19S-33E.

14. PERMIT NO.

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

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)

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 some pertinent
to this work.)*

Propose to plug back in casing with bridge plug 3265' and reperforate
in original pay zone 3249½ - 3250½ and 3254' with 3-4 shots per foot.

Plan to return well to production.

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

SIGNED

TITLE Partner

DATE January 18, 1974

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: