

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

5. LEASE DESIGNATION AND SERIAL NO.

LC 064175-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

YOUNG UNIT

8. FARM OR LEASE NAME

9. WELL NO.

19

10. FIELD AND POOL, OR WILDCAT

YOUNG QUEEN

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

Sec.20-18S-32E NMPM

14. PERMIT NO.

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

3756

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:

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*

Convert to WIW

(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.)*

This well was converted to injection as follows:

11-29-69 Cleaned out with sand pump to 3874'

11-30-69 Cleaned out to 3980'

12-3-69 Cleaned out to 4125'

12-4-69 Perforated with 2 jet shots per foot from 3816'-18', 3821'-24', 4032'-58'

12-18-69 Fraced well with 948 bbls fresh water, 36,000# 20/40 sand & 500
gallons 15% regular acid

12-19-69 Cleaned out to 4125'

12-25-69 Put well on injection

Injection first five days averaged Upper Queen 204 BPD @ 0 psi,
Penrose 230 BPD @ 0 psi.

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

SIGNED

Lerman J. Ledwith

TITLE

Division Superintendent

DATE

1-27-70

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

