

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

5. LEASE DESIGNATION AND SERIAL NO.

NMC052

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

11-66

7. UNIT AGREEMENT NAME

Mescalero Ridge Unit

8. FARM OR LEASE NAME

Mescalero Ridge Unit

9. WELL NO.

20

10. FIELD AND POOL, OR WILDCAT

Pearl Queen

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

Sec 34-19S-34E

12. COUNTY OR PARISH

Lea

13. STATE

New Mex.

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 ☐ DRY HOLE - PLUGGED AND ABANDONED2. NAME OF OPERATOR
Sinclair Oil & Gas Company3. ADDRESS OF OPERATOR
P.O. Box 1920, Hobbs, New Mexico4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' fr North line and 660' fr East Line

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, 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) CHANGE IN WELL NUMBER ☒(NOTE: Report results of multiple completion on Well
Completion or Recore Completion 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.)*

Filed to show change in well number for record purposes of a plugged
and abandoned dry hole. This well was drilled as Well No. 4 and was
plugged on completion 6-29-66.

This form filed to show change in well number from Well No. 4 to new
well number of Well No. 20

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

SIGNED [Signature]

TITLE Superintendent

DATE 9-19-66

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

*See Instructions on Reverse Side

J. L. GORDON
ACTING DISTRICT ENGINEER