Form 9-331 (May 1963)	NITED STATES DEPARTMENT OF THE INTER	SUBMIT IN T LICATE OR (Other instru s on r	
SUNDRY NOTICES AND REPORTS ON WELLS			N. M. 04452 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	his formula properties to daily area deepen or plug	back to a different reservoir. proposals.)	
OIL GAS WELL X WEL	. 🗆		7. UNIT AGREEMENT NAME
WELL AS WELL OTHER 2. NAME OF OPERATOR			Mescalero Ridge 8. FARM OR LEASE NAME #26"
Ernest A. Hanson			Mescalero Ridge Uni
P. O. Box 1515, Roswell, New Mexico			9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)			10, FIELD AND POOL, OR WILDCAT
At surface			Pearl Queen
330' FSL & 1980' FWL Sec. 26, T-19-5, R-34-E, N.M.P.M.			11. SEC., T., R., M., OK BLK. AND SURVEY OR AREA
	ounty, New Mexico	Ni •	Sec. 26 - 195 - 34E
14. PERMIT NO.	15. ELEVATIONS (Show whether DE 3739 KB	, RT, GR. etc.)	12. COUNTY OR PARISH 13. STATE
16.	Check Appropriate Box To Indicate N	Nature of Notice, Report, or	Other Data
	NOTICE OF INTENTION TO:		QUENT REPORT OF:
TEST WATER SHU	T-OFF PULL OR ALTER CASING	WATER SHUT-OFF	X REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON* CHANGE PLANS	SHOOTING OR ACIDIZING	ABANDON MENT*
(Other)		(Other)	ts of multiple completion on Well pletion Report and Log form.)
17. DESCRIBE PROPOSEI proposed work, nent to this worl	O OR COMPLETED OPERATIONS (Clearly state all pertinen If well is directionally drilled, give subsurface loca	ot dotails and also northern date	a including satisfies 4 to 4 to 4
1- 4-67	Spud well @ 5:30 A.M. Ran 8-5/8", 24#, H-40 cs CaCl. Cement circulated	g. @ 230' w/ 200 to the surface.	sx. reg. + 2%
1- 5-67	W.O.C. 24 hrs. Pressure 30 minutes. No leaks.	tested casing to Prep. to drill ah	600 lbs. for lead.
1-19-67	T. D. 5220' dolomite. R @ 5220' w/ 350 sx. neat Tested casing @ 1000 psi	Incor cement. W.	#, J-55 csg. O.C. 48 hrs. No leaks.
			· 실험증원은 회장 :
			美国第二人 经收益
18. I hereby certify th	nat the foregoing is true and correct		
SIGNED		xplor. Manager	DATE 1-21-67
(This space for F	ederal or State office use)		
APPROVED BY _	TITLE		Thamp'
	APPROVAL, IF ANY:		DATE