

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

STAMPS IN TRIPLICATE  
OTHER INFORMATION ON TOP  
OF SHEET

FORM SPECIFIC  
Budget Form No. 42 (11-61)  
D. LEASE DESIGNATION AND SERIAL NO.

MM-086

6. U. S. INDIAN, ALCOTTE, OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to design or plan location of oil and gas reservoir.  
Use "APPLICATION FOR PERMIT" for such purposes.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
The Superior Oil Company

3. ADDRESS OF OPERATOR  
P. O. Box 1900, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
330' FNL & 1650' FWL Section 25, T-19-S, R-34-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DE, RL, GL, etc.)  
GR: 3782'

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Government "E"

9. WELL NO.  
4

10. FIELD AND POOL, OR WILDCAT  
Lea (San Andres)

11. SEC., T., R., NG. OR GR., AND SURVEY OR AREA  
Sec. 25, T-19-S, R-34-E

12. COUNTY OR PARISH, 13. STATE  
Lea New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: |                          | SUBSEQUENT REPORT OF:                |                          |
|-------------------------|--------------------------|--------------------------------------|--------------------------|
| TEST WATER SHUT-OFF     | <input type="checkbox"/> | WATER SHUT-OFF                       | <input type="checkbox"/> |
| FRACURE TREAT           | <input type="checkbox"/> | FRACURE TREATMENT                    | <input type="checkbox"/> |
| SHOOT OR ACIDIZE        | <input type="checkbox"/> | SHOOTING OR ACIDIZING                | <input type="checkbox"/> |
| REPAIR WELL             | <input type="checkbox"/> | REPAIRING WELL                       | <input type="checkbox"/> |
| (Other)                 | <input type="checkbox"/> | (Other) Extension of Permit to Drill | <input type="checkbox"/> |

(Note: Report results of multiple completion or Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. (If a shallow well, give pertinent data; if a deep well, give pertinent data, including estimated date of starting and proposed well, if well is directionally drilled, give subsurface location and measured and true vertical depths for all markers and zones pertinent to this work.)

In view of shortage of available rigs to drill the shallow San Andres well, we request that our drilling permit be extended to March 1, 1975. To the best of knowledge at present, a rig should be available by January 15, 1975. This well permit was dated September 26, 1974, and the above requested extension would be for 66 days.

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

SIGNED T. D. Clay T. D. Clay TITLE Petroleum Engineer DATE 12-11-74

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

*John Simon*