8. I hereby certify that i						
	0			TARLSBAD, I	NEW MEXIC	
7/19/87 Day 24 Dr	rilling @ 9,270	0' KB (525') in 70% lime .	and 30% shale. Survey : 1/4º @ 891		7 1987	
7/18/87 Day 23 Di	rilling @ 8,745	5' KB (296') in 80% lime	and 20% shale.	ACCEPTED F	FOR RECOR	
·w	ith weak blow	. S.I. 3 hr. Prep. to POOH	w/DST tools. Survey: 3/4º @ 8440	or. Ers	RCE 3	
Si	ind. First open	with weak blow for 30".	S.I. for 2 hrs., second flow, open 6	o" <u>~</u>	e 🗷 '	
7/17/87 Day 22 Drilling @ 8,449' KB (103') in lime. SPDST #1:5630'-5677' in Delaware sand. First open with weak blow for 30". S.I. for 2 hrs., second flow, open				(1) (1) (2)		
	•	•	-	Š	1 14 M	
7/16/87 Day 21 Drilling @ 8346' KB (280') in lime. All Yellow Jacket testing completed; few slight leaks, but no problem to repair.				A C	12 VE	
			rvey: 12 @ 7805" and 12 @ 8066".	ARE	; <b>-</b>	
			P test @ 8,066' KB (700')			
S	urvey : 3/42 (	6' KB (800') in sand, dolo 9 6777' and 3/42 @ 7276				
nent to this work.)	•	•	The second and the second	depths for all markers	and zones perti-	
Other) 17. DESCRIBE PROPOSED OR	COMPLETED OPE	RATIONS (Clearly state all nort	(NOTE: Report results of Completion or Recompletion or Recompletions and give pertinent dates, is locations and measured and true vested.	tion Report and Log for:	m.)	
REPAIR WELL		CHANGE PLANS	(Other) Papert results	IRILING	X	
SHOOT OR ACIDIZE	'	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMEN	(T*	
FRACTURE TREAT	_	ULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CA	<del>     </del>	
TEST WATER SHUT-OF	rr I	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING W	FELL	
1	OTICE OF INTEN	TION TO:	BURSEQUE	NT REPORT OF:		
16.			te Nature of Notice, Report, or Ot	ther Data		
		3639	GL	Lea	NM	
14. PERMIT NO.		15. ELEVATIONS (Show wheth	er DF, RT, GR, etc.)	12. COUNTY OR PARISH	-	
				Sec. 10, T-20		
1980' FWL &	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA					
At surface				Wildcat		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* Sec also space 17 below.)				10. FIELD AND POOL, OR WILDCAT		
P. O. Box 15	18, Roswel	1, New Mexico 88	201	9. WELL NO.	•	
2. NAME OF OPERATOR Read & Stevens, Inc. 3. ADDRESS OF OPERATOR				8. FARM OR LEASE NAME North Lea Federal 9. WELL NO.		
1.	Use "APPLICA	ATION FOR PERMIT—" for st	lug back to a different reservoir.	7. UNIT AGREEMENT NA	ME	
		ICES AND REPORT		INDIAN, ALLUITEE	, or thise name	
		SEOLOGICAL SURVEY	0	NM-56264  G. IF INDIAN, ALLOTTEE	Ou marns with	
	DEFARTMENT OF THE INTERIOR verse Blde)			Budget Bureau No. 42-R1424.  5. LEASE DESIGNATION AND SERIAL NO.		
	DEPART	MENT OF THE INT	FRIOD (Other instructions on re-	5 LEASE DESIGNATION	AND SERVE NO	

Title DATE

CONDITIONS OF APPROVAL, IF ANY: