

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 0554776	
2. NAME OF OPERATOR Cleary Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Drawer 2358, Midland, TX 79702		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & FEL, Section 17, T-22-S, R-32-E Unit (J)		8. FARM OR LEASE NAME Federal 17	
14. PERMIT NO. Letter, 7-30-74		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3681' GL; 3701' KB (Datum)		10. FIELD AND POOL, OR WILDCAT Undesignated (Morrow)	
		11. SEC. T, R, M, OR BLK. AND SURVEY OR ABRA Sec. 17, T-22-S, R-32-E, NMPM	
		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:		SUBSEQUENT REPORT OR	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
REPAIR WELL <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)*

1. Rig up pulling unit, install BOP & pull 2-7/8" tubing.
2. Run 4-1/8" mill on 2-7/8" tbg and mill-out Otis "WB" pkr @ 14,290' (in reverse) and push pkr to 14,612' PBD.
3. Pull 2-7/8" tubing laying down.
4. Run Baker "Lock Set" (or equivalent) pkr with an "On-Off" tool in the 5", 18" liner on 2-3/8", N-80 tubing to 14,485' and set. Remove BOP and make up wellhead.
5. Swab test perfs 14,568-586' until cleaned up and flowing.
6. Turn into sales line and test.
7. Repotential well.

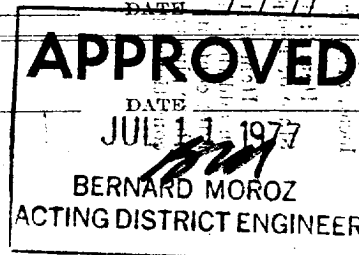
18. I hereby certify that the foregoing is true and correct

SIGNED Max Douglas
Max Douglas
(This space for Federal or State office use)

TITLE District Manager

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____



*See Instructions on Reverse Side

APPROVED

12-1977
CAL CONSTRUCTION CONTR.
HOBBS, N. M.