

# UNIT ACQUISITION REPORT FOR HYDROLOGICAL SURVEY

## UNIT ACQUISITION REPORT FOR WELLS

1. APPLICANT'S NAME ☒ AS ☐ WELL ☐ OTHER

2. NAME OF OPERATOR

APR 15 1981

3. NAME OF COMPANY

U.S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

4. LOCATION OF WELL (SEE CHECKLIST)

AT SURFACE: 640' ECL 640' ECL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

15. CHECK AT-RISK FOR TO AND DATE NATURE OF NOTICE, REPORT, OR OTHER DATA

6. CASE

7. IF NO JAN. ACQUISITION OF THE NAME

8. UNIT ACQUISITION NAME

9. NAME OF WELL

10. WELL NO.

11. THIRD OR WELL CAT NAME

12. COUNTY OR PARISH 13. STATE

14. API NO.

15. ELEVATIONS (SHOW DE, FOS, AND WD)

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACURE TREAT

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ILLEGIBLE

9. (If not, S. Copy Valves: Make and Type)

10. (If not, S. Copy Valves: Make and Type)

11. (If not, S. Copy Valves: Make and Type)

12. (If not, S. Copy Valves: Make and Type)

13. (If not, S. Copy Valves: Make and Type)

14. (If not, S. Copy Valves: Make and Type)

ACCEPTED FOR RECORD

APR 17 1981

U.S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO