

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

LC 032591 (c)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

HARDY

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

PADDOCK

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

19 T21S R37E

12. COUNTY OR PARISH 13. STATE

LEA

NM

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

CAMPBELL & HEDRICK

3. ADDRESS OF OPERATOR

P. O. BOX 401, MIDLAND, TEXAS 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

660 FSL & 1980 FEL of Sec.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3507GL

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

REPAIR WELL ☒

CHANGE PLANS ☒

(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

(Other) ☐

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.)*

Plan to run tracer survey to determine source of water entry.
Squeeze of water approximate interval 5150-5300. Drill out cement.
Reperforate Paddock 5190-5250±
Test and acidize with 500 gal as necessary.
Start work within two weeks

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

SIGNED

TITLE

PARTNER

DATE

10/23/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

11/12/91

CONDITIONS OF APPROVAL, IF ANY: