*.= please attach pertinent documents
I. OPERATOR / LOCATION INFORMATION SKELLY GASSLINE PLANT # 1 LPG NELL ?
Operator <u>EXTTY</u> <u>Lie Co</u>
Address Sox 1137
Eunice N.M. 88231 Phone (505) 394-2516
Well unit # K Location 2471/4 7 1659/W
T. 24 R. 37 Sec. 27 5W 1/4 NE 1/4 Nu-1/4
County LEH
Purpose of well (brine supply, LPG storage, potash dissolution)
LOG STURAGE.
II. DRILLING / SITING INFORMATION
Contractor Skelly
Date drilling started Unk Date drilling completed Unk
Drilling method (Cott Cott bable redary)
Elevation of ground surface Anger 3340 How measured —
Date measured Order of survey
Name of surveyor
Total depth of hole Unit
Attach schematic of well ,include open hole interval, perforations, etc. *
Type of drilling fluid
Type of drilling mud if used (brand if known)
List any additives to the drilling mud, or any other chemicals put down well:
Describe casing tests performed
Other tests