

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on re-
verse side)

COPY TO O. O. C.

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"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR	9. WELL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT
660' FSL & 660' FWL, Sec. 22, T-23-S, R-37-E	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)
	3304' GL
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data	12. COUNTY OR PARISH
	13. STATE
	Lea NM

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) Abandon Teague Simpson and * <input checked="" 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.)*

* recomplete in the North Teague Devonian

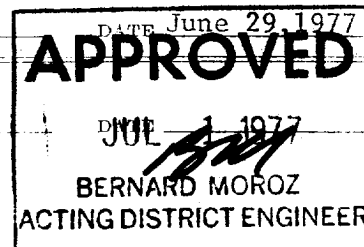
Pull producing Equipment. Set CIBP at 9000' , cap with 6 sacks 35' cement. Abandoning Teague Simpson zone. Test casing and BP with 500#. Perforate 7" casing with 4, 1/2" JHPF in the interval 7180' to 7320'. Acidize new perfs with 15,000 gallons 15% NEA acid. Swab and clean up. Test well from North Teague Devonian.

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

SIGNED D. F. Berlin TITLE Area Engineer

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:



ABOVE

CLG-
PHOTO. N. 10.