

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
LEASE DESIGNATION AND SERIAL NO.
NM 029050

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 Abandon		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR Melzer & Henderson		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR Box 953 Midland, Texas 79702		8. FARM OR LEASE NAME Federal F
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660 FSL & L980 FEL Sec. 29 T-26-S, R-27-E		9. WELL NO. 1
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Jalmat Seven Rivers (Yates)
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 29T-26-S, R-37 E
		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:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" 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. Set CIBP w/ 30' of cement at 2930' on 8-19-77
 2. Cut and pulled 1787' of 5½", ran tubing spotted
 3. 25 sacks at 1787' to 1687' on 8-19-77
 4. 35 Sacks at 1200 to 1079' on 8-19-77
 5. 35 Sacks at 630' to 509' on 8-19-77
 6. 10 sakks at 30' to 0' on 8-19-77
- Dry hole marker installed.

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

SIGNED F. C. Stickney TITLE Agent

DATE 8-30-77

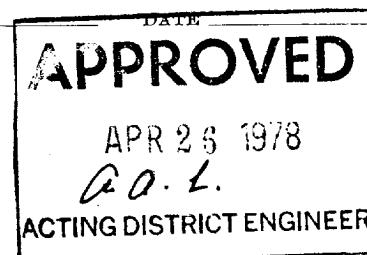
(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side



RECEIVED
OIL COMPANY COMM.
JAN. 2. 1911