

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIP DATE
(Other instructions on reverse side)

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

NM-0553893

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Humble Oil & Refining Company		South Lea Unit
3. ADDRESS OF OPERATOR Box 1600, Midland, Texas 79701		8. FARM OR LEASE NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1,980' FWL & 1,980' FSL		9. WELL NO. 1
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Wildcat (Ellenburger)
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 17 T-26-S, R-36-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 :		SUBSEQUENT REPORT OF :	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" 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"/>	

(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.)*

Drilled 16" hole to 3,430'. Ran 85 jts. of J-55 and S-80 ^{3 3/8"} casing, set at 3,405'.
Cemented w/2,300 sacks Trinity lite-wate cement w/3.75# salt and 5# Gilsonite per sack. POB 9:15 A.M. 7-28-69, top of cement 825'. Cemented with 100 sacks through 1" pipe from 825' to surface. WOC 29 1/4 hrs. Tested casing w/1000# per 30 min. No drop in pressure.
Drilled plug at 2:30 P.M. 7-29-69.

DFL/hnf

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

SIGNED A. J. Clemmer TITLE Proration Supervisor DATE 8-28-69

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

AUG 29 1969

*See Instructions on Reverse Side

J. L. GORDON
PLANNING DISTRICT ENGINEER