

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE  
(Other instructions  
reverse side)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		5. LEASE DESIGNATION AND SERIAL NO. NM - 17446	
2. NAME OF OPERATOR The Superior Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N.A.	
3. ADDRESS OF OPERATOR P. O. Box 71, Conroe, Texas 77301		7. UNIT AGREEMENT NAME Government "L"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FEL & 1980' FNL Sec. 18 - T24S - R34E		8. FARM OR LEASE NAME Government "L"	
14. PERMIT NO. NM - 17446		9. WELL NO. #1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3575.7 feet G.R.		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18-T24S-R34E	
		12. COUNTY OR PARISH Lea	13. STATE New Mexico

## 18. 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 type="checkbox"/>
(Other) <u>Run casing</u> <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.) \*

Drilled 17-1/2" hole to 5400'. On November 1, 1977, ran 5400' of 13-3/8" S-80, 72#, 68#, 61# & 54.5# Butt & Sfc casing. On same day, cemented w/3771 sx of TLW, 10#/sx salt, 5#/sx gilsonite, 1/4#/sx flocele, followed w/200 sx Class "C" neat. Cement returns throughout. On November 2, 1977, cut off 13-3/8" casing. Installed 20" 3000# by 13-5/8" 500# OCT casing spool. Also on November 2, 1977, tested 13-3/8" casing pack-off to 1000# 15 min. OK. Nipped up 14" Series 1500 BOP, Hydril, Shaffer rotating head choke manifold. Drilling 12-1/4" @ 6615'.

In answer to your letter of November 11, 1977 concerning cementing of 13-3/8" casing, cut cement was circulated to surface. Annulus was pressure tested to 400# and held okay.

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

SIGNED P. E. Ilavia  
P. E. IlaviaTITLE Sr. Drilling EngineerDATE Nov. 7, 1977

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

ACCEPTED FOR RECORD  
NOV 16 1977

\*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO