

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

COPY TO O. C. G.

SUBMIT IN TRIP
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1-1000
DESIGNATION AND NUMBER
HM 14214

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. NAME OF AGREEMENT NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME Wells Federal	
3. ADDRESS OF OPERATOR 1800 Wilco Building Midland, Tx. 79701		9. WELL NO. 11	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2317 FWL, 430 FSL		10. WELL AND POOL, OR FIELD Galmat Yates	
14. PERMIT NO.		11. SURFACE T, R, M, OR BENEATH SURVEY OR AREA Sec 4, T-25S, R-37E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3172' GL		12. COUNTY OR PARISH Lea	
		13. STATE NM	

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 checked="" type="checkbox"/>	ABANDONMENT <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion in Field 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 start of proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths to all markers pertinent to this work.)*

10/30/78 MOL RUPU. Perf: 2888,95,2900,02,03,10,32,33,34,69,70
77,78,90,92,98,99,3000,02,08,15,17,18,24

10/31/78 Acidize w/2000 gal 15% NEA
11/1/78 Frac w/36,000 gal Titan, CO₂, 45,000 # 20/40 sand
11/2/78 Land production tubing @ 3073' KB
11/7/78 Well stabilized @ 271 Mcf/day into line. Final Report.

RECEIVED

AUG 31 1979

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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

SIGNED J. L. R. [Signature] TITLE Production Engineer DATE 11/7/78

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

