

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate  
(Other instructions on  
reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 054667

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR El Paso Natural Gas Company		8. FARM OR LEASE NAME Gregory Federal	
3. ADDRESS OF OPERATOR 1800 Wilco Building; Midland, Texas 79701		9. WELL NO. 2-Y	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  760' FNL, 1650' FWL		10. FIELD AND POOL, OR WILDCAT Crosby Devonian	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3,002' Gr.	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 33, T-25-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 type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Unsuccessful completion	

(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.)\*

5-1-76: MOL & RU BOP. Released Baker Type "R" packer & pulled tubing. Ran CBL & casing inspection logs. WIH with tubing & cement retainer, set retainer at 7,825'. Pumped 100 sx C1 "C" cement. Shut down overnite to WOC. WIH with tubing & tagged cement plug @ 7,759' (65' plug). Came up hole with tubing to 6,970' & spotted 300 gallons acid. Perforated 6,966'-6,972' with 2 shots per foot. Set packer at 6,904', swabbed large amount of acid water with no gas show. Laid down tubing. Shut down operation. Now attempting to obtain partner's approval to P&A.

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

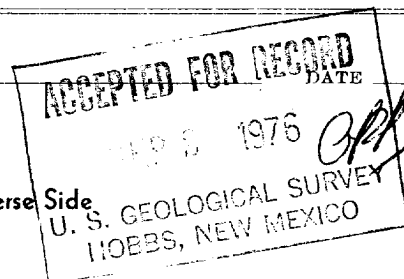
SIGNED C. C. GoodwinTITLE Administrator Prod. Services DATE August 23, 1976

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

\*See Instructions on Reverse Side



RECEIVED

1976

U.S. DEPARTMENT OF COMMERCE  
WASHINGTON, D. C.