

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other Instructions on Reverse Side)Form approved.
Budget Bureau No. 42-R1424.
6. LEASE DESIGNATION AND SERIAL NO.

LC-055546

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

E. J. Wells

9. WELL NO.

16

10. FIELD AND POOL, OR WILDCAT

Jalmat (Gas)

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 5, T-25-S, R-37-E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

3219.8 G.L.

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

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Set casing

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☐
☐
☐
☒(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.)*

Reached total depth of 3350' on 8-28-84. Ran 78 joints (3350.85') of 7" OD, 23 lb/ft, ST&C casing and landed at 3350' RKB. Cemented casing with 400 sx of API Class-C cement containing 3% Halliburton Econolite followed by 200 sx of a 50-50 blend of API Class-C cement and Pozmix A containing 18% salt and 1/4 lb/sx Floseal. Plugged down at 5:00 a.m. CDT 8-29-84. Circulated 150 sx of excess cement to pit. Pressure tested casing to 1500 psi and pressure held okay. Released pressure and float held okay.

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

SIGNED Michelle HernandezTITLE Administrative AssistantDATE Sept. 4, 1984

(This space for Federal Agency Use)

ACCEPTED FOR RECORD

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

SEP 7 1984

*See Instructions on Reverse Side

NEW MEXICO

RECEIVED

SEP 12 1984

C.O.D.
HOBBS OFFICE