

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

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

NM-0321613

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. ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR
Anaco Production Company

3. ADDRESS OF OPERATOR
Box 68, HOBBS, N. M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

510' FSL * 1830' FEL SEC. 15 (Unit O, SW 1/4 SE 1/4)

14. PERMIT NO.

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

3260' R.D.B.

7. UNIT AGREEMENT NAME

SOUTH MATIX UNIT FED

8. FARM OR LEASE NAME

9. WELL NO.

24

10. FIELD AND POOL, OR WILDCAT

FOWLER ELLEN BURGER

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

15-24-37 NM PM

12. COUNTY OR PARISH 13. STATE

LEA

N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☒

(Other) ☐

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 perti-
nent to this work.) *

Acidized perforations 9505'-85' w/ 2000 gal 15% HCl.

Prior- Pmp 32 B0 x 11 BW 24 hours.
After- " 32 B0 x 3 BW " "

TD - 10,012'
PB - 9,634'

OC - 1-18-74
COMP - 2-1-74

5 1/2" CSA 10,012'

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

SIGNED

Loy R. Yakum

TITLE

ADMINISTRATIVE ASSISTANT

DATE

FEB 13 1974

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

0+4 USGS H

1- DIV
1- SUSP
1- R&M

1- CONJCO
1- H&CO
1- TENNECO
1- CHEVRON

*See Instructions on Reverse Side