

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Submitted in Triplicate
(Other instructions on reverse side)

Form approved,
Bureau Order No. 42-11424,
5. BUREAU DESIGNATION AND SERIAL NO.

42-11424-15

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. WELL ☐ GAS WELL ☐ OTHER <u>DRILLING</u>	7. DATE ACQUISITION NAME
2. NAME OF OPERATOR	8. FIRM OR LEASE NAME
3. ADDRESS OF OPERATOR	9. WELL NO.
BOX 38, HOBBS, N. M. 88240	10. FIELDS AND POOL, OR WILDCAT
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	11. SEC., T., R., S., OR SECT. AND SURVEY OR AREA
510' FSL - 1330' FEL See 15 (Unit C, SW 1/4 SE 1/4)	12. COUNTY OR PARISH
14. PERMIT NO.	13. STATE
15. ELEVATIONS (Show whether DS, RT, GS, etc.)	

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☒	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) <u>Abandonment</u>	

(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.) *

Durawson Bros Drilling Co completed 17 1/2" hole
3:30 PM 4-2-68. On 4-3-68 13 7/8" OD 43# H-40
Casing set @ 321' w/ 380 S. Cement. Circulated 5044.
After 7200 18 hours tested casing w/ 600 psi for
30 min. Test O.K.

Reduced hole to 11" @ 321' and resumed
drilling operations.

ILLEGIBLE

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

SIGNED

AREA SUPERINTENDENT

TITLE

DATE

4-4-68

(This space for Federal or State office use)

APPROVED BY

TITLE

APPROVED

DATE

CONDITIONS OF APPROVAL, IF ANY:

- 0-4-1503-14
- 1-1130
- 1-550P
- 1-1130
- 1-ATLANTIC
- 1-COINGO
- 1-510 OF TCA
- 1-TENNESSEE
- 1-SINGLUND

*See Instructions on Reverse Side

APR 5 1968

J L GORDON
ACTING DISTRICT ENGINEER