

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUB IN TRIPLICATE
(Other instructions on reverse side)

Copy to SF
Form approved.
Budget Bureau No. 42-R1.

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. OIL WELL ☐ GAS WELL ☐ OTHER ☒ **P & A COPY**

2. NAME OF OPERATOR
SOLAR OIL COMPANY ✓

3. ADDRESS OF OPERATOR
Box 5596, Midland, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1650' FS & WL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, MA, GA, etc.)
3815' Gr

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**O. C. C.
OFFICE**

6. LEASE DESIGNATION AND SERIAL NO.
NM 04686-A

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Harben Federal

9. WELL NO.
1

10. FIELD AND POOL OR WILDCAT
**Ind. Indian Basin - main
Wildcat**

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 13 T-21-S, R-23-

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexi

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 checked="" 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 type="checkbox"/>	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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.)

It is proposed to plug this well as follows:

35 sk plug 9200'-9100'
35 sk plug 7500'-7400'
35 sk plug 6100;-6000'
35 sk plug 4100'-4000'
35 sk plug 2000'-1900'
10 sk plug at surface
Hole filled with mud between plugs
Set marker.

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U. S. GEOLOGICAL SURVEY

(This plugging program was verbally approved by U.S.G.S. 8-29-69)

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

SIGNED *M. J. Smith*

TITLE Production Clerk

DATE Sept. 17, 1969

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

SEP 22 1969

**R. L. BECKMAN
ACTING DISTRICT ENGINEER**

*See Instructions on Reverse Side