DEPARTMENT OF THE INTERIOR (Other Instructions on reverse side)

Alle of the second

GEOLOGICAL SURVEY

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

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Copy 651

NM 0554479

SUNDRY	NOTICES	AND	REPORTS	ON	WELLS
JOI 1211	, . •				21.00

(Do not use this form for pi Use "APP	roposals to drill or to deepen or plug b LICATION FOR PERMIT—" for such p	- · · · · · · · · · · · · · · · · · · ·	
1. OIL GAS WELL OTHE	·R	RECEIVE	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME
2. NAME OF OPERATOR Robert N. Enfield 3. ADDRESS OF OPERATOR P. O. Box 2431, Santa 4. LOCATION OF WELL (Report locat See also space 17 below.) At surface	a Fe, New Mexico 87501 ion clearly and in accordance with any	SEP 2 6 1974 State requirements C. C. ARTESIA, DEFICE	Whitehead-Federal Whitehead-Federal Wildeat Wildeat Survey or AREA
2310 FNL & 330 FEL	15. ELEVATIONS (Show whether Di	P, RT, GR, etc.)	Sec. 19, T-22-S, R-26-) 12. COUNTY OR PARISH 13. STATE Eddy N.M.
	Appropriate Box To Indicate P		her Data NT REPORT OF:
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS	water shut-off fracture treatment shooting or acidizing (Other) (Note: Report results of Completion or Recomple	REPAIRING WELL ALTERING CASING ABANDONMENT* of multiple completion on Well tion 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.) *

Prep to set cement plugs 150' plug @ 645' - 495' 50' plug at surface 25 sacks cement

Install regulation marker Clean location, when pits dry.

As per verbal approval

519 - S 1974

1 9 FOOLDGICAL SURVEY

	ALAEJIA, NEW MEXICO	
18. I hereby certify that the foregoing is true and correct SIGNED OPERATOR OPERATOR	DATE 9/3/74	
(This space for Federal or State office use) APPROVED BY TITLE TITLE	DATE	
CEP SEATON		

*See Instructions on Reverse Side