

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

45F

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> P&A		RECEIVED	
2. NAME OF OPERATOR Abo Petroleum Corporation		SEP 19 '88	
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210		O. G. D. ARTESIA OFFICE	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980 FSL & 660 FWL, Sec. 13-T26S-R27E		5. LEASE DESIGNATION AND SERIAL NO. NM 20949	
14. PERMIT NO. API #30-015-24140		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3121.2' GR		7. UNIT AGREEMENT NAME	
		8. FARM OR LEASE NAME Hay "C" Federal	
		9. WELL NO. 1	
		10. FIELD AND POOL, OR WILDCAT Undes. Delaware	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit L, Sec. 13-26S-27E	
		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(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.) \*

Plugged well as follows:

- 4-1-86. Plug #1: Set 70 sx Class "C" w/2% CaCl<sub>2</sub> at 3495'. Displaced 6 bbls into perfs to give plug at 3495-3050'.  
Plug #2: Set 20 sx Class "C" Neat at 2350-2150'.  
Plug #3: Set 10 sx Class "C" Neat at surface.

Cut off wellhead. Install regulation abandonment marker.

Permission obtained from Mr. Vince Balderez, BLM, Carlsbad, NM, by Mr. Eddie Mahfood, YPC to plug well.

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

SIGNED Eddie Mahfood TITLE Production Supervisor

DATE 4-4-86

(This space for Federal or State office use)

ORIG. SGD PAI GIRI

APPROVED BLM, MINERAL RESOURCES  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 9-16-88

\*See Instructions on Reverse Side

POST 1D-2  
4-18-86  
P&A