

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Nav. 14-20-0603-586	
2. NAME OF OPERATOR George R. Jones & W. H. Peachee		6. IF INDIAN, ALLOTTEE OR TRIBE NAME John Martin	
3. ADDRESS OF OPERATOR 1620 Wichita Plaza Wichita, Kansas		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' nsl & 660' wel		8. FARM OR LEASE NAME John Martin	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) Gr. 6661		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC. T., R., M., OR BLE. AND SURVEY OR AREA 6 - T18N - R12W BLK. 1	
		12. COUNTY OR PARISH McKinley	
		13. STATE New Mex.	

16. 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"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

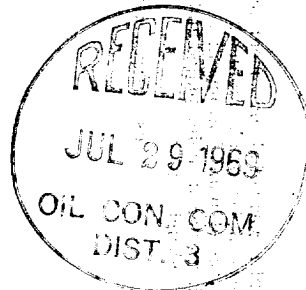
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Plug and abandon 6/2/68 per instrs. Mr. John Ward

plug # 1; 1600 to TD 33 sx  
2; 440 to 525 15 sx  
3; surface 10 sx

(Halli burton)

Location has been properly marked and leveled.



RECEIVED

JUN 7 1968

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N.M.

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

SIGNED B. F. Latch

TITLE Geologist

DATE 6/5/68

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MAY 23 1968

\*See Instructions on Reverse Side

P. T. McGRATH

DISTRICT ENGINEER