

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

159

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Jicarilla A

Mobil Apache

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

South Blanco

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

6-23N-2W NMPM

12. COUNTY OR PARISH 13. STATE

Rio Arriba

NM

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR August J. Wagenseiller

SHERMAN F. WAGENSELLER

3. ADDRESS OF OPERATOR

Mr. Morris B. Jones, 1223 Bank of New Mex. Bldg., Alb. NM 87102

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

790 fnl and 790 fwl

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7204KB

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

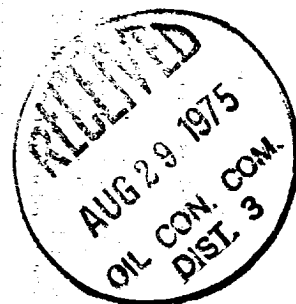
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to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

Plan to P & A in the following manner:

- Plug #1 2950 - 3109(TD) inside 4 1/2" csg. - 15 sxs
- #2 2650 - 2800(Ojo Alamo) inside 4 1/2" csg. - 15 sxs
- #3 100' scross 4 1/2" cut-off stub - 35 sxs
- #4 75 - 125- Bottom of 8 5/8" surface casing - 20 sxs
- #5 10 sxs in top of surface

Native mud in hole between plugs

Install marker and clean up location.



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

SIGNED

TITLE M. B. Jones, Engineer

DATE Aug. 22, 1975

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Okal

*See Instructions on Reverse Side