Form	9-331
(May	1963

(Other)

18.

UNITED STATES DEPARTMENT OF THE INTERIOR (Other instructions on re-

	Form a	pproved.		
	Budget	Bureau	No.	42-R142
IVACE				

SF-081160F 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

GEOL	OGICAL	CHDVEV

ALIX 15 514						
SUNDRY	NOTICES	AND	REPORTS	ON	WFI	15

(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.)

WELL WELL NAME OF OPERATOR

ADDRESS OF OPERATOR Development Corporation

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

At surface

2310° FEL & 1980° FSL, Sec. 21, T-18N-, R-3W

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6812 KB 8. FARM OR LEASE NAME San-Luis Federal

7. UNIT AGREEMENT NAME

10. FIELD AND POOL, OR WILDCAT

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

Sec. 21, T-18N, R-3W, NMPM 12. COUNTY OR PARISH | 13. STATE

New Mexico

16.

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

NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PULL OR ALTER CASING FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS

WATER SHUT-OFF REPAIRING WELL FRACTURE TREATMENT ALTERING CARING SHOOTING OR ACIDIZING (Other) _ (Note: Report results of multiple completion on Completion or Recompletion Report and Log form.)

Sandoval

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.).

This well was temporarily abandoned effective May 28, 1974 and was turned over to Mr. Noel Reynolds as per the attached Letter Agreement in which Mr. Reynolds agrees to assume all responsibility for further completion or plugging activities.



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I hereby certify that the foregoing is true an	correct	· · · · · · · · · · · · · · · · · · ·	
SIGNED Car I		n	DATE 12/12/74
(This space for Federal or State office use)	Vice President		
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	D	ATE

*See Instructions on Reverse Side

Derson