

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R-424.

5. LEASE DESIGNATION AND SERIAL NO.

N.M. 25298A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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7. UNIT AGREEMENT NAME

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8. FARM OR LEASE NAME

Federal 12

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Eagle Mesa

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

Sec. 12, T19N-R4W

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mexico

1.

OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Jordan Oil and Gas Co., c/o K&A Inc. Minerals Mngt.

3. ADDRESS OF OPERATOR

P. O. Box 529, Evansville, Wyoming 82636

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

See also space 17 below.)

At surface

685' FSL, 330' FWL, Sec. 12, T19N-R4W

14. PERMIT NO.

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

6,693' Gr.

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 COMPLETE

ABANDON*

CHANGE PLANS

XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

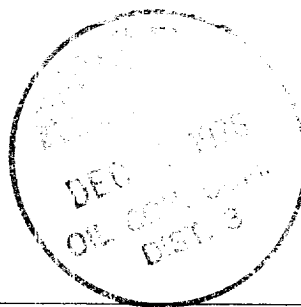
(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.)*

Well will be plugged and abandoned as follows:

50 sx plug from 5605-5450
50 sx. plug from 4590-4410
50 sx. plug from 3340-3190
50 sx. plug from 2350-2190
30 sx. plug from 200-150
10 sx. plug at surface.

Verbal approval has been obtained from Ed Schmidt - U.S.G.S.



RECEIVE

DEC 04 1978

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

SIGNED

John E. Evans

TITLE

Agent

DATE

Nov. 11, 1978

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side