

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

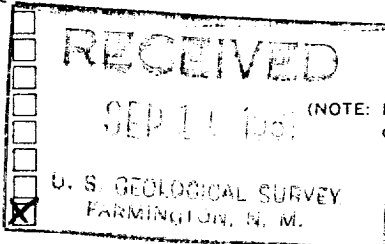
1. oil ☐ well gas ☐ well other ABM Don  
2. NAME OF OPERATOR  
Wm. B. White Jr.  
3. ADDRESS OF OPERATOR  
1300 W. Main St. Farmington, N.M.  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 115' to 145' S. 10' E. 1/4 Sec. 29  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:



5. LEASE  
NM 26037  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
9. WELL NO. Capezon  
Federal #10  
10. FIELD OR WILDCAT NAME  
Wildcat  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
512 29  
T17N 17W  
12. COUNTY OR PARISH  
Sandoval  
13. STATE  
N.M.  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6306

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.)\*

ABANDON - Microfracture - Surface to 115' T.D. with 115' cement plug.



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Wm. B. White Jr. TITLE Operator DATE 12/1

(This space for Federal or State office use)  
APPROVED BY (Orig. Sgd.) RAYMOND W. VINYARD TITLE ACTING DISTRICT SUPERVISOR DATE DEC 01 1981  
CONDITIONS OF APPROVAL, IF ANY:

C. G.