

5 BLM 1 McHugh 1 File 1 Tenneco

Form Approved.  
Budget Bureau No. 42-R1424

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 ☐ gas ☐ other ☒ P & A

2. NAME OF OPERATOR  
Jerome P. McHugh

3. ADDRESS OF OPERATOR  
P O Box 208, Farmington, NM 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 850/S 1690/E  
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:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

RECEIVED  
APR 4 1983

(NOTE: Report results of multiple completion or other change on Form 9-331-C)

RECEIVED  
APR 7 1983

U. S. GEOLOGICAL SURVEY

OIL CON. DIV.]

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 location, and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Plan to plug and abandon as follows:

1. Pull 16 jts. 1 1/4" O.D., 2.4#, V-55, 10 Rd, EUE tubing and Baker Model "C" invertible packer.
2. Fill 2-7/8" O.D., 6.5#, 8 Rd, EUE tubing for casing from PBSD 1284' to surface, using 35 sx of class "B" cement.
3. Install permanent dry hole monument and cut off or remove tie-downs.
4. Fill all pits.
5. Clean and restore location per BLM instructions.

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

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

SIGNED Sherman E. Dugan TITLE Agent DATE 4-4-83

Sherman E. Dugan

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

Gene