DEPARTMENT OF THE INTERIOR (Other instructions on region of the proposal content of the proposal store of the	Form 9-331					Form approved.	
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.    CAR	DEPARTMENT OF THE INTERIOR (Other instructions on re-				re- Buuget B	Budget Bureau No. 42-R1424.  5. LEASE DESIGNATION AND SERIAL NO.	
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.  Our "APPLICATION FOR PERMIT—" for such proposals.)  7. Unit agreement name  8. Parm or lease name  Abtems Gas Gom "B"  9. Well No.  1. Docation of well (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  As surface  90' Fill and 1010' Fill  11. SEC, T., B., M., OR BLE. AND  SURVEY OR AREA  12. COUNTY OR PARISH 13. STATE  14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF  PRACTURE TREAT  MULTIPLE COMPLETE  ABANDON*  MULTIPLE COMPLETE  ABANDON*  (Other)  (Other)  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting a proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per					SF 0810	961	
OIL GAS WELL OTHER  2. NAME OF OPERATOR  PAR AMERICAN PETROLEUR CORPORATION  3. ADDRESS OF OPERATOR  P. O. BOX 480, Farmington, Now Mexico  4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At Surface  990 FSL and 1010 FML  10. FIELD AND POOL, OR WILDCAT  ASCO-Fictured Cliffs  11. SEC., T., R., M., OR ELK. AND SURVEY OR AREA  M/A M/A Section 25, T-29-M, E-10-W  14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  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 WATER SHUT-OFF PRACTURE TREAT  MULTIPLE COMPLETE  FRACTURE TREAT  MULTIPLE COMPLETE  ABANDON*  (Other)  (Other)  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent detas, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers a		DRY NOTICES	S AND REPORTS		6. IF INDIAN, ALLO	TTEE OR TRIBE NAME	
Abrens Gas Com "B"  3. ADDRESS OF OPERATOR  P. O. BOX 489, Permington, Bow Mexico  4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements." See also space 17 below.) At surface  990° PSL and 1010° PML  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting arproposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	1. OIL GAS	<b>₩</b>			7. UNIT AGREEMENT	T NAME	
3. ADDRESS OF OPERATOR  P. O. BOX 480, Permington, Bow Moxico  4. Location of Well (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  990 PSL and 1010 PML  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  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 ABANDON*  CHANGE PLANS  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting approposed work. If well is directionally drilled, give subsurface location and measured and true vertical depths for all markers and zones per	2. NAME OF OPERATOR	8. FARM OR LEASE	NAME				
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  990 PSL and 1010 FM.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  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 SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting an approposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	PAN AMERICAN	Abrems Gas	Abrama Gas Com "B"				
See also space 17 below.) At surface  990' FSL and 1010' FM.  11. SEC, T., E., M., OR BLK. AND SURVEY OR ARRA  12. COUNTY OR PARISH  13. STATE  14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  16.  17. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF  FRACTURE TREAT  MULTIPLE COMPLETE  SHOOT OR ACIDIZE  REPAIR WELL  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting a proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per			Now Maxico		9. WELL NO.		
14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  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)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting approposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	See also space 17 bel						
14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  12. COUNTY OR PARISH 13. STATE  S563* GL  16.  17. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE SHOOT OR ACIDIZE ABANDON* (Other)  (Other)  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent detas, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	990' 7SL and	1010' PWL			SURVEY OR A	SURVEY OR AREA	
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 MULTIPLE COMPLETE SHOOT OR ACIDIZE SHOOT OR ACIDIZE ABANDON* (Other)  (Other)  (Other)  TO ESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting an proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per					T-29-H, R-10	)-W	
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* (Other)  (Other)  Other)  WATER SHUT-OFF FRACTURE TREATMENT ALTERING WELL (Other)  (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 an proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	14. PERMIT NO.				12. COUNTY OR PAR	ISH 13. STATE	
NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL  FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE  SHOOT OR ACIDIZE ABANDON*  (Other)  (Other)  (Other)  (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 an proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per			2203, GF		Man Justs	Hen Hexte	
TEST WATER SHUT-OFF  FRACTURE TREAT  MULTIPLE COMPLETE  SHOOT OR ACIDIZE  ABANDON*  (Other)  (Other)  WATER SHUT-OFF  FRACTURE TREATMENT  ALTERING WELL  (Other)  (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 an proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	16.	Check Approp	oriate Box To Indicate	Nature of Notice, Report,	or Other Data		
SHOOT OR ACIDIZE  REPAIR WELL  (Other)  CHANGE PLANS  (Other)  CHANGE PLANS  (Other)  CHANGE PLANS  (Other)  CHANGE PLANS  (Other)  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 and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per		NOTICE OF INTENTION	TO:	SU	BSEQUENT REPORT OF:		
SHOOT OR ACIDIZE  REPAIR WELL  (Other)  CHANGE PLANS  (Other)  CHANGE PLANS  (Other)  COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	TEST WATER SHUT-0	FF PULL	OR ALTER CASING	WATER SHUT-OFF	REPAIRI	NG WELL	
REPAIR WELL  (Other)  (Other)  (Other)  (Other)  (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 an proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	FRACTURE TREAT	MULTI	IPLE COMPLETE	FRACTURE TREATMENT	ALTERIN	G CASING	
(Other)  (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 an proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	SHOOT OR ACIDIZE	ABAND	•и•		L	MENT*	
(Other)  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 and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	REPAIR WELL	CHANG	E PLANS	(35-37)			
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per	(Other)			(Note: Report re Completion or Re	esults of multiple complet: completion Report and Log	lon on Well g form.)	
	17. DESCRIBE PROPOSED O proposed work. If nent to this work.)	well is directionally	NS (Clearly state all pertidrilled, give subsurface	nent details, and give pertinent d	lates, including estimated	date of starting any	
In reference to our Form 9-331 of 12-21-65 on the subject Abrams Gas Com "B" No. 1, we moved in a well service unit 12-17-65, pulled tubing and ran a casing inspection log.	moved in a well	service unit	: 12-17-65, pull	ied tubing and ren a	casing import		
	cest iron bridg	o plug was so	t at 1620', two	boles were perfora	ted at 7061, and		
Casing was found corroded from 350-360' and 510'-890' with indicated hole at 708'. A cast from bridge plug was set at 1620', two holes were perforated at 706', and casing	· ·				_	tulated	
Casing was found corroded from 350-360' and 510'-890' with indicated hole at 708'. A cast from bridge plug was set at 1620', two holes were perferated at 706', and casing leak equessed with 600 sacks Class "C" coment down 5-1/2" casing. Coment circulated	to surface and	equeezed last				resente	
Casing was found corroded from 350-360' and 510'-890' with indicated hole at 708'. A cast iron bridge plug was set at 1620', two holes were perferated at 706', and casing leak equessed with 600 sacks Class "C" coment down 5-1/2" casing. Coment circulated to surface and equessed last 100 sacks into the formation with maximum pump pressure	900 pai. Brill	ed out coment				198',	
Casing was found corroded from 350-360' and 510'-890' with indicated hole at 708'. A cast iron bridge plug was set at 1620', two holes were perforated at 706', and casing leak equessed with 600 sacks Class "C" coment down 5-1/2" casing. Coment circulated to surface and equessed last 100 sacks into the formation with maximum pump pressure 900 psi. Brilled out coment but found lesk at 809'. Perforated one hole at 808',				ti and discussion to the contract to the contr	bh 160 macha 201	1 min	
Casing was found corroded from 350-360' and 510'-890' with indicated hole at 708'. A cast iron bridge plug was set at 1620', two holes were perferated at 706', and casing leak equessed with 600 sacks Class "C" coment down 5-1/2" casing. Coment circulated to surface and equessed last 100 sacks into the formation with maximum pump pressure	shaceas you. But	rams were' so	is because as wer	. was sesdoneses ar	CH TAC SURES ON		

1-1/4" tubing and leaded at 1912'. Unloaded well with forming agents and flutre-Propand external supply gas and produced to pipeline one day in Innuary, 1966. Alternately blow well and shut in for pressure buildup in Pebruary but well will not produce and is shut in pending disposition.

RECEIVED

MAR 9 1966

MAR 9 1966

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

SIGNED

G. W. Marion, Jr.

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

## Instructions

eral and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Fed-

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by coment or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment. Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices.

, U.S. GOVERNMENT PRINTING OFFICE: 1963-O-685229

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