Form 9-331 (May 1963)

## UNITED STATES SUBMIT IN TRIPLICATE\* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side) **UNITED STATES**

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

REPAIRING WELL

SUBSEQUENT REPORT OF:

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

RECEIVED

GEOLOGICAL SURVEY		I-09-200-50	
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 "APPLICATION FOR PERMIT—" for such proposals.)		6. IF INDIAN, ALLOTTER OR TRIBE NAME	
OIL WELL	GAS WELL OTHER DETY HOLE	7. UNIT AGREEMENT NAM	16
2. NAME	OF OPERATOR AND PRINCE AND CONTORATION	8. FARM OR LEASE NAME.	
••	Alspert Drive, Fashington, New Medico \$7461	9. WELL NO.	# \$
	rion of well (Report location clearly and in accordance with any State requirements.* lso space 17 below.) arface	10. PIELD AND POOL, OR WILDCAT	
2310' FWL and 330' FWL		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA	
14. PERMI	IT NO.   15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
	5032 GL, 5937 MM	Sen John	Now Menter
16.	Charle Appropriate Roy To Indicate Nature of Notice Report	or Other Data	

ALTERING CASING MULTIPLE COMPLETE FRACTURE TREATMENT . ABANDON\* SHOOTING OR ACIDIZING ABANDON MENT\* CHANGE PLANS (Other)

WATER SHUT-OFF

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.) \*

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

Due to this well's failure to produce oil in commercial quantities, we and abandon as follows:

Soot 50 macks coment from 735' to surface.

PULL OR ALTER CASING

Breet FIA merker and clean up location.

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

SIGNED

APPROVED BY

AUG 2 4 1967 U. S. GEOLOGICAL SURVEY 18. I hereby certify that the foregoing is AIne had befree G. W. Eaton, Jr. ires Incine TITLE DATE (This space for Federal or State office use) DATE CONDITIONS OF APPROVAL, IF ANY: