

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions
reverse side)

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Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>		5. LEASE DESIGNATION AND SERIAL NO. NM-02127-B
1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER TA, Gas Zone Depleted		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR Marathon Oil Company		7. UNIT AGREEMENT NAME Lea Unit
3. ADDRESS OF OPERATOR P. O. Box 2409, Hobbs, New Mexico 88240		8. FARM OR LEASE NAME Lea Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 810' FNL and 1980' FEL		9. WELL NO. 8
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Lea Unit Penn
15. ELEVATIONS (Show whether DF, RT, GR, etc.) KDB 3693', GL 3674'		11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA Sec. 12-20S-34E
		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input checked="" type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	
(Other) See Below*		(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 and 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.)*

1. Rig up pulling unit and pull tubing.
2. Run free point in 5 1/2" casing.
3. Cut and pull 5 1/2" casing at indicated free point (cement top at 12,400').
4. Set cement plugs according to ^{USGS} NMOC as follows:
 - A. CIBP above existing Penn perms with 35' cement cup.
 - B. 100' plug in and out of 5 1/2" casing stub.
 - C. 100' plug at top of the Wolfcamp.
 - D. 100' plug at top of the Bone Springs.
 - E. 100' plug at top of the Glorieta.
 - F. 100' plug in and out of the 9 5/8" casing shoe.

*Plan to abandon hole below 9 5/8" casing and plan to convert well to salt water disposal when permit granted.

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

SIGNED [Signature] TITLE Production Engineer DATE August 19, 1977

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

**APPROVED
AS AMENDED**

DATE AUG 22 1977

[Signature]
BERNARD MOROZ
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

U. S. Geological Survey
P. O. Box 1157
Hobbs, New Mexico 88240

HOBBS DISTRICT

CONDITIONS OF APPROVAL:

1. The Hobbs office (telephone (505) 393-3612) is to be notified when workover operations are to be commenced.
2. Blowout prevention equipment is required.
3. After setting CIBP and placing 35' cement cap, and the free point is not at the top of the Wolfcamp, call this office for a revised plugging program.