

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

New Mexico - 04825

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR John H. Trigg	8. FARM OR LEASE NAME Federal "C" Lease
3. ADDRESS OF OPERATOR P. O. Box 106 - Beljaan, New Mexico	9. WELL NO. 1-28
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  1980 Feet from North and 660 Feet from West Lines	10. FIELD AND POOL, OR WILDCAT Wildcat
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA S.28; T.20S; R.29E; B.27M
15. ELEVATIONS (Show whether DF, ST, GH, etc.) 3866.1 Gr.	12. COUNTY OR PARISH Eddy
	13. STATE N. M.

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

(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 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.)\*

On September 16, 1964 this well was plugged and abandoned in the following manner;

1. Ran tubing and filled hole with mud.
2. Spot 20 sack cement plug from 1440' to 1340'.
3. Set 20 sack cement plug from 800' to 800'.
4. Ran collar bumper and knuckled 7" casing off @ 460'.
5. Pulled 460' of 7" OD cased casing.
6. Set 35 sack cement plug from 510' to 410'.
7. Set 10 sack cement plug from 20' to surface.
8. Erected regulation marker pipe.

Location is cleaned up and ready for inspection.

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

SIGNED

Kenneth E. Aston

TITLE

Production Clerk

DATE October 6, 1964

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

OCT 20 1964  
RONALD L. SHOOK  
LOCAL DISTRICT ENGINEER

\*See Instructions on Reverse Side