

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42-R1424.

Copy to JH

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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐
2. NAME OF OPERATOR
Harry Ptasynski
3. ADDRESS OF OPERATOR
P. O. Box 43, Casper, Wyoming 82602
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
660' FSL and 660' FWL of Section 44, T14S, R28E

5. LEASE DESIGNATION AND SERIAL NO.
NM 24681
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Nola Grace Federal
9. WELL NO.
1
10. FIELD AND POOL, OR WILDCAT
Undesignated Grayburg
11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Section 4 T14S, R28E

14. PERMIT NO.
15. ELEVATIONS (Show whether DE, RT, or MC)
3571 GL
12. COUNTY OR PARISH
Chaves
13. STATE
N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(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 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.) *

Propose to plug and abandon by pumping 100' cement plug from TD of 1628', heavy mud to 10 sack cement plug at surface. Set dry hole marker, cover pits and rip location and access roads according to current requirements.

RECEIVED
MAR 15 1977
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED [Signature] TITLE Agent DATE March 5, 1977
(This space for Federal or State office use)

APPROVED BY [Signature] TITLE DATE
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side