(Do i

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3.

Drawer DD

Form Approved.

Budget Bureau No. 42-R1424

Drawer DD

rtesia, NN 88210_{5. LEASE}

UNITE) 5	IAIL	5 mr cepra,	TANE	00410
DEPARTMENT (0F	THE	INTERIOR		

NM-16094

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
not use this form for proposals to drill or to deepen or plug back to a different voir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME HAGERMAN 29 FEDERAL
oil gas other PLUGGED WELL	9. WELL NO.
DWIGHT A. TIPTON ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME WILDCAT
P O BOX 1597. LOVINGTON, NEW MEXICO 88260	11. SEC., T., R., M., OR BLK. AND SURVEY OR

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 1855' FEL OF SEC.29
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

GEOLOGICAL SURVEY

AREA SEC.29, T.14 S., R.27 E.

ROSWELL, F.

12. COUNTY OR PARISH 13. STATE CHAVES NEW MEXICO

14. API NO.

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

15. ELEVATIONS (SHOW DF, KDB, AND WD) 3434.6 GR

				0.01.0
REQUEST FOR APPROVAL	. TO:	SUBSEQUENT	REPORT OF:	
TEST WATER SHUT-OFF			RECEIVED	
FRACTURE TREAT				
SHOOT OR ACIDIZE				
REPAIR WELL			.IAN 1 1 198	3 (NOTE: Report results of multiple completion or zon
PULL OR ALTER CASING				change on Form 9–330.)
MULTIPLE COMPLETE			O. C. D.	X
CHANGE ZONES			(), (c. <i>b</i> .	· ·
ABANDON*	XXXX		ARTESIA, OFFIC	it γ
(other)				

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.)*

TOTAL DEPTH - 990 FEET. 8-5/8" SURFACE CASING SET AT 313 FEET.

NO COMMERCIAL SHOWS OF OIL OR GAS ENCOUNTERED.. PROPOSE TO PLUG AND ABANDON BY SETTING CEMENT PLUGS AS FOLLOWS:

100-SACK CEMENT PLUG IN INTERVAL 610-990 FEET
100-SACK CEMENT PLUG IN INTERVAL SURFACE-369 FEET

THIS CONFIRMS ORAL APPROVAL GIVEN 7-10-82.

-	Valve: Manu. and Type		Se	t @	
SIGUED Arthu	IT BYDWIN .	Agent	DATE December	r 27, 1982	
APPROVED BY	ORIG. SGD.) DAVID R.TOE	or Federal or State of	ice us		
1	JAN 1 0 1983		UAR 6	95 3	
oe	DISTRICT SUPERVISOR See Instructions on Rever		MINERALS 1		

45F