Submit 3 Copies to Appropriate District Office	State of Ne Energy, Minerals and Natu			Form C-10 Revised 1-	1	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II DISTRICT II Santa Fe, New Mexico 27 104-7188			WELL API NO.			
P.O. Drawer DD, Artesia, NM 88210 <u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	APR 1 5 1991		5. Indicate Type of Lease STATE FEE X 6. State Oil & Gas Lease No.		FEE X	
DIFFERENT RESE	TICES AND REPORTS ON ROPOSALS TO DRILL OR TO DE RVOIR. USE "APPLICATION FO C-101) FOR SUCH PROPOSALS	DR PERMIT	7. Lease Name or U	Juit Agreement Name		
1. Type of Well: OIL WELL X WELL			Alma Shield	ls		
2. Name of Operator N. Dale Nichols 3. Address of Operator	N. Dale Nichols 3. Address of Operator			8. Well No. 9. Pool name or Wildcat		
P.O. Box 1972, Midland 4. Well Location	1, Texas 79702	·····	ACME (San A	Andres)		
Unit Letter <u>M</u> :3	7s	th Line and 99 Range 27E	red rion (Line	
Section		hether DF, RKB, RT, GR, etc.) 4002 'GL	NMPM CHUVE			
	Appropriate Box to Indi ITENTION TO:		Report, or Other			
	PLUG AND ABANDON		X	ALTERING CASING		
				PLUG AND ABAND		
		CASING TEST AND C			г 1	
				· · · · · · · · · · · · · · · · · · ·		
 12. Describe Proposed or Completed Ope work) SEE RULE 1103. 1) Plug Back to 1918' with 42 sacks of ne 		queez cement around	casing shoe			
2) Rig up reverse unit	. Drill out and cle	an out to TD of 198	31'.			
3) Plug back to 1975'	with Cal-Seal.					
4) Ran packer and acid Flush with 9.5 bbls recovered load with	s KC1 water. ISIP 37	2500 gal 28% HCl @ 5, 10 min 275, 15 m	3/4 BPM @ 800 nin 180. Swat) PSI. bed and		
5) Test on pump 9BOPD,	, 3BWPD and 18 MCFD.					
I hereby certify that the information above is	true and complete to the best of my knowl	edge and belief.				
SIONATURE	ut	<u> </u>	echnician	DATE)1 (915)	
TYPE OR PRINT NAME John E. Ni	chols		·	TELEPHONE NO.68	32-5621	
MIKE	NAL SIGNED BY WILLIAMS RVISOR, DISTRICT II	TITLE		DATE APR 2	2 1991	

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