

NM Oil Cons. Commission
UN I D STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Drawer DD

SUBMIT IN TRIPL
(Other Sections on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Plugged & Abandoned Well 9-7-74		5. LEASE DESIGNATION AND SERIAL NO. NM-16114 <i>expired</i>	
2. NAME OF OPERATOR Wood & Locker, Inc. (Formerly Wood & Cockburn, Inc.)		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 505 N. Big Spring, Ste. 600 Midland, TX 79701		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit letter P located 510' from the south line and 660' from the East line of Section 3.		8. FARM OR LEASE NAME Federal "B"	
14. PERMIT NO. Approved 11-21-73		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3852' GR		10. FIELD AND POOL, OR WILDCAT Und. Double L. Queen Assoc.	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 3, T-15-S, R-29-E		12. COUNTY OR PARISH Chaves	
13. STATE NM		RECEIVED BY MAY -4 1987 O. C. D. ARTESIA OFFICE	

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">TEST WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">PULL OR ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREAT <input type="checkbox"/></td> <td>MULTIPLE COMPLETE <input type="checkbox"/></td> </tr> <tr> <td>SHOOT OR ACIDIZE <input type="checkbox"/></td> <td>ABANDON* <input type="checkbox"/></td> </tr> <tr> <td>REPAIR WELL <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> </tr> <tr> <td colspan="2">(Other) Re-plug & abandon <input checked="" type="checkbox"/></td> </tr> </table>	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) Re-plug & abandon <input checked="" type="checkbox"/>		<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">WATER SHUT-OFF <input type="checkbox"/></td> <td style="width: 50%;">REPAIRING WELL <input type="checkbox"/></td> </tr> <tr> <td>FRACTURE TREATMENT <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>SHOOTING OR ACIDIZING <input type="checkbox"/></td> <td>ABANDONMENT* <input type="checkbox"/></td> </tr> <tr> <td colspan="2">(Other) <input type="checkbox"/></td> </tr> </table>	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 type="checkbox"/>	(Other) <input type="checkbox"/>	
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) Re-plug & abandon <input checked="" type="checkbox"/>																			
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 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.) *

- 1) Move in and rig up single derrick pulling unit and reverse unit drilling equipment.
- 2) Weld stub on 8-5/8" surface casing and install 10" 3000 psi WP blowout preventor.
- 3) Drill out 5-sack surface plug, 30-sack shoe plug from 193' to 293' and 30-sack stub plug from 916' to top of 4 1/2" casing at 966' using 7-7/8" bit and 10.0 ppg brine water.
- 4) Rig up Halliburton and fill hole completely from 966' to surface with 248 sacks (326.7 cu. ft.) Class "C" cement with 2% calcium chloride. Leave bit and 2-3/8", 5.95#, P-105, PH-6 Hydril tubing in well.
- 5) Cut off 8-5/8" surface casing at surface and weld on dry hole marker.
- 6) Release all equipment.
- 7) Clean up location and leave well plugged & abandoned.



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

SIGNED D. M. Johnson TITLE President DATE 4-22-87

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

