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DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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. NAME OF OPERATOR United Service Oil Company	5. LEASE DESIGNATION AND SERIAL NO. LC 028755 (A)
2. ADDRESS OF OPERATOR P. O. Box 1919, Midland, Texas 79702	6. IS INDIAN, ALLOTTEE OR TRIBE LAND?
3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See instructions on reverse side.) 990' FSL, 2310' FWL of Section 35, T-17-S, R-27-E, Ladly County, New Mexico	7. UNIT AGREEMENT NAME
4. NAME OF WELL	8. FRA. OR LEASE NAME Russell-C
15. ELEVATIONS (Show whether DF, AT, GR, etc.)	9. WELL NO. 6
	10. FIELDS AND POOL, OR WILDCAT Empire Yates - T. Rivers
	11. SEC., T., R., M., OR L. AND SURVEY OR AREA Sec. 35, T-17-S, R-27-E
	12. COUNTY OR PARISH Eddy
	13. STATE New Mexico

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) ☐	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting 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.)

W.D. 431', Lime. This well was plugged and abandoned in the following manner:

1. WIRU pulling unit.
2. Pulled rods and tubing.
3. Mixed and pumped 175 sacks Class C cement with 50# hulls.
(Circulated 10 sacks to pit.)
4. Will install dry hole marker at later date.

Albert Means with USGS witnessed job.

RECEIVED
FEB 28 1977
U.S. GEOLOGICAL SURVEY
MIDLAND, TEXAS

I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Region Oper. Manager DATE 2/25/77

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONCURRENCE OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

POSTED
ID-2
PAH
4-1-11