

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-0 3777 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 checked="" type="checkbox"/> OTHER <u>INJECTION</u> | 7. UNIT AGREEMENT NAME <u>FOREST POOL UNIT</u> |
| 2. NAME OF OPERATOR <u>LAYTON ENTERPRISES, INC.</u> | 8. FARM OR LEASE NAME <u>FOREST POOL UNIT</u> |
| 3. ADDRESS OF OPERATOR <u>3103 79th STREET</u> <u>LUBBOCK, TEXAS 79423</u> | 9. WELL NO. <u>13</u> |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>2130' FSL 660' FEL</u> <u>SEC. 34, T16S, R29E</u> | 10. FIELD AND POOL, OR WILDCAT <u>SQ LAKE GSA</u> |
| 14. PERMIT NO. | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>SEC 34, 16S, 29E</u> |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3658' EST. D.F.</u> | 12. COUNTY OR PARISH <u>EDDY</u> |
| | 13. STATE <u>N.M.</u> |

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

NOTICE OF INTENTION TO:

| | |
|--|--|
| 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 checked="" type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| 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.) *

Notice of intent to plug and abandon by previous operator is hereby rescinded.

Well is temporarily abandoned pending results of current waterflood study.

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

SIGNED Ronald L. Layton TITLE President DATE 12-1-76

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side