

UNITED STATES ~~N.M.O.C.D. COPY~~
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

Federal NM-0162

AMENDED

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	DATE 10 1979	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Walsh and Watts, Inc. ✓	G.O.C. ARTERIA, OFFICE	North Square Lake Premier
3. ADDRESS OF OPERATOR 1111 Seventh Street, Wichita Falls, Texas 76301		8. FARM OR LEASE NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL and 660' FWL Section 5, Township 16S, Range 31E		9. WELL NO. 10
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.) 4026 DF	10. FIELD AND POOL, OR WILDCAT Square Lake Grayburg San Andres No
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 5, T16S, R31E
		12. COUNTY OR PARISH Eddy
		13. STATE New Mexico

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 checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<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"/>		<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.)

Well #10 is not capable of producing in paying quantities.
This well has 2 7/8" casing with a string of 1 1/2" tubing stuck.

Plugging Procedure:

- (1) Pull all 1 1/2" tubing if possible. If not possible, cut tubing off at approximately 2100'.
- (2) Pump 35 sack cement plug from 2100' to total depth. (Pump through tubing.)
- (3) Perforate at 1784' at the base of the salt and squeeze 100 sacks of cement behind the pipe, leaving a 100-foot cement plug from 1750' to 1850'.
- (4) Perforate at 697' and squeeze 100 sacks of cement behind the casing, leaving a 100-foot cement plug from 650' to 750'.
- (5) Pump 20 sacks of cement into surface 7 5/8" and 2 7/8" casing. Properly cap same.

ALTERNATE: If it is possible to pull the 2 7/8" casing from the hole, we propose to pull the 2 7/8" and fill the hole with cement.

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

SIGNED

Alfred B. Guinn

TITLE

Vice-President

DATE October 12, 1979

(This space for Federal or State office use)

(Orig. Sgd.) GEORGE H. STEWART

ACTING DISTRICT ENGINEER

DATE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: