SUBMIT IN TRIP _ STATES feren 9-751 (May 1963) DEPARTMENT OF THE INTERIOR (Other Instructions verse side) 5. LEASE DESIGNATION AND SEC. ST 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 F C F I V E D 7. UNIT AGREEMENT NAME wert X OTHER 8. FARM OR LEASE NAME 2 1974 DEC NAME OF OPERATOR M. Dodd "A" SUN OIL COMPANY P. O. Box 1861, Midland, Texas DELL.

LOCATION OF WELL (Report location clearly and in accordance with any State requirements.

No also space 17 below.)

At surface 9. WELL NO. 3. ADDRESS OF OPERATOR 10. FIELD AND POOL, OR WILDCAT Grayburg Jackson (Q.G.SA) 11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA 660' FSL & 660' FEL Sec. 22, T-17-S, R-29-E Sec. 22, T-17-S, R-29-E 12. COUNTY OR PARISH | 13. STATE 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. New Mexico 3567' DF Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data 16. NOTICE OF INTENTION TO: REPAIRING WELL WATER SHUT-OFF PULL OR ALTER CASING TEST WATER SHUT-OFF ALTERING CASING FRACTURE TREATMENT MULTIPLE COMPLETE FRACTURE TREAT SHOOTING OR ACIDIZING ABANDONMENT* SHOOT OR ACIDIZE TA well status report REPAIR WELL CHANGE PLANS (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.) * Temporarily abandoned WELL STATUS: TEMPORARY ABANDONMENT DATE ETC: 10-10-72 REASON FOR TEMPORARY ABANDONMENT: Uneconomical to produce Will be used for secondary recovery 4. FUTURE PLANS FOR WELL: __ APPROXIMATE DATE FOR WORKOVER OR P&A OPERATIONS: September Nov. Stores 10 7 ARTESIA, NEW Y. SURVA. REMARKS: 18. I hereby certify that the foregoing is true and correct TITLE PRORATION ANALYST (This space for Mederal or State office use) UNLESS FURTHER APPROVED. WELL MUST
BE PUT TO BENEFICAL USE OR PLUGGED BY DATE _ IF ANY: HER LUSE OR 1975
*See Instructions on Reverse Side APRIL OF ACTING DISTRICT ENGINEER