

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TR
(Other Instruct
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CATE*
or re

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC029338A

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. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Water Injection Well	RECEIVED BY MAR 18 1986 O. C. D. ARTESIA, OFFICE	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Burnett Oil Co., Inc.		Grayburg Jackson (San Andres)
3. ADDRESS OF OPERATOR 1500 InterFirst Tower, Fort Worth, TX		8. FARM OR LEASE NAME GJSAU
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit N, 440' FSL, 2200' FWL, Sec. 12 T17S R30E		9. WELL NO. 33
10. FIELD AND BEOL, OR WILDCAT		11. SEC., T., R., N., OR E. AND SURVEY OR AREA 34-9-G-SF
12. COUNTY OR PARISH		13. STATE NM
14. PERMIT NO.	15. OBSERVATIONS (SHOW WEATHER PM, RT, GR, etc.) 3763'	12-17S-30E Eddy

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACURE TREAT	☐	FRACURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
REPAIR OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETION	☐	ADDERING CASING	☐
ABANDON*	☒	ABANDONMENT*	☐
CHANGE PLANS	☐		

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.)

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

This well has recently undergone remedial work to repair the 7" casing because it would not hold pressure. Repairs were not successful and the hole is junked; consequently, we propose to plug and abandon this well with the following (please refer to the attached schematic):

- (1) Set cement retainer @ $\pm$ 2525'. Pump 200 sk. cement plug below
- (2) Retainer. Spot 100' plug on top of retainer.
- (3) Spot 25 sk. cement plug surface - 75'. - *Both sides of csg.*
- (4) Set 4" cemented marker.
- (4) Reclaim location.

*① Prof at 1300' (Base salt)
100' plug Both sides of csg.
Prof at 485' (Top salt) - Core cut
or 100' plug*

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

[Signature] TITLE **Production Superintendent** DATE **2/27/86**

(This space for Federal or State office use)

APPROVED BY *[Signature]* TITLE **AREA MANAGER** DATE **3-7-86**

CONDITIONS OF APPROVAL, IF ANY:

Subject to
Like Approval

*See Instructions on Reverse Side

Form 3160-5
United States Dept. of the Interior
Bureau of Land Management
Sundry Notices and Reports on Wells
Page Two

Grayburg Jackson (San Andres) Unit
Well #33
LC 029338A

17. Description of Completed Operations (Continued)

5/12/85 Tag cement inside 7" csg. at 163' with 1" tubing. Filled 7" casing with Cl. C neat from 163' to surface with 31 sks. Tag top of cmt. behind 7" with 1" tubing at 45'. Filled annulus from 45' to surface with 25 sks. Cl. C neat. Circulated 40 sks. to pit. Installed permanent 4" X 6' marker. Removed injection line, filled pit, ripped and seeded location and road as per BLM specifications. All P&A work witnessed by NMOCD. Location ready for inspection.

5/15/86

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14. PERMIT NO.		15. ADJUSTMENTS (Show whether DE, RT, GR, etc.) 3763'		11. SEC., T., R., M., OR BLM AND SURVEY OR AREA 12-17S-30E	
				12. COUNTY OR PARISH Eddy	
				13. STATE NM	

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT ON:			
WATER SHUT-OFF	☐	WELL OR LINES CLOSING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACURE TREAT	☐	WELL OR LINES COMING	☐	FRACURE TREATMENT	☐	ABANDONING Casing	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☒	SHOOTING OR ACIDIZING	☐	ABANDONMENTS	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other)	☐		
(Other)	☐			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

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Perf at 1300' (Base salt)
100' plug both sides of csg.
Perf at 485 (Top salt) - Cement
or 100' plug

I hereby certify that the foregoing is true and correct.		TITLE Production Superintendent		DATE 2/27/86	
(This space for Federal or State office use)		AREA MANAGER		DATE 3-17-86	
APPROVED BY Scott Adams		TITLE		DATE	
CONDITIONS OF APPROVAL, IF ANY:					

Subject to
Like Approval
by State

*See Instructions on Reverse Side