UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

LC 028936 c

GEOLOGICAL SURVEY

SUNDRY NOTICES	AND REPORTS	ON AVELLOS E I V	Fn	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
t use this form for proposale to de			- 4	

	Use "APPLICATION FOR PERMIT—" for such proposals.)	
1	WELL K WELL OTHER	V J 3 1979 7. UNIT AGREEMENT NAME
	Anadarko Production Company ARTE	3. C. ESIA. OFFICE S. FARM OR LEASE NAME Federal "S"
3.	APPRESS OF OPERATOR	9. WELL NO.
4.	P. O. Box 67, Loco Hills, New Mexico 88255 FOR ATTEN OF WELL (Report location clearly and in accordance with any State requirem See also space 17 below.) At surface	
	1650' FNL & 990' FWL Sec. 28, T17S, R30E	Fren
	Eddy County, New Mexico	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
		28 - 17S - 30E
14.	PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	2613° DF	Eddy New Mexic
16	Check Appropriate Box To Indicate Nature of No	tice, Report, or Other Data

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:				
		·	r — —				
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL	
FRACT! RE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING	
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING		ABANDONMENT*	
GEPAIR [®] WELL		CHANGE PLANS		(Other) Change P	lans - Te	est Pump	X
Other)				(Note: Report res Completion or Reco	ults of multiple empletion Report	e completion on Wellert and Log form.)	i

17 DISCRIBE 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.)*

Permission was granted October 20, 1975 to Plug & Abandon this well.

Permission was granted March 2, 1976 to test-pump this well prior to Plugging & Abandonment.

To date the well has not been test-pumped or Plugged & Abandon. We would like to keep this well as Temporarily Abandoned pending further evaluation.

I hereby certify that the foregoing is true and correct			
SIGNED Org. signed Jerry E. Buckles TITLE	Area Supervisor	DATE _	November 5, 1979
(This space for Federal or State office use)			
APPROVED BY CONDITIONS OF APPROVAL IS ANY.		DATE _	Many or a son