

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP- ATE*
(Other instructions
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

458

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water injection well	5. LEASE DESIGNATION AND SERIAL NO. LC-029415 B
2. NAME OF OPERATOR William A. & Edward R. Hudson	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 198, Artesia, New Mexico 88210	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any state requirements. See also space 17 below.) At surface 360' f. south and 1980' f. west lines of Section 24-17S-31E	8. FARM OR LEASE NAME Puckett "B"
14. PERMIT NO.	9. WELL NO. 5
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3879 D.F.	10. FIELD AND POOL, OR WILDCAT Maljamar (GB-SA)
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24-17S-31E
	12. COUNTY OR PARISH Eddy
	13. STATE N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.) *

Well was plugged and abandoned as follows:

On May 8, 1987, set bridge plug in 7" casing at 3250'. Spotted cement from 3250' to 3175'. Loaded hole with salt gel mud. Spotted cement plug from 2900' to 2800'. Spotted cement from 1700' to 1600'. Applied 1,000 psi. pressure on 7" casing to pump some cement behind 7' thru hole at 1675'. Spotted cement from 650' to 550'. Displaced salt mud with fresh water. Spotted 50' cement at surface. Installed 4" marker with well data. Pumped 80' cement down 7"-8 5/8" annulus.

On May 20, 1987, location was cleaned of all debris. Area around well was reseeded with 3# yellow sweetclover, 3# alkali sacaton, 9# four wing salbrush and 300# 16-20-0 fertilizer. Area is ready for inspection.

ACCEPTED FOR RECORD

SJS

JUN 9 1987

CARLSBAD, NEW MEXICO

RECEIVED
JUN 5 11 39 AM '87
CARLSBAD RESOURCE
AREA HEADQUARTERS

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

SIGNED

Ralph L. Gray

TITLE Consulting Engineer

DATE

June 3, 1987

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Approved by _____
Special Agent in Charge
Bureau of Land Management

*See Instructions on Reverse Side

Post ID-2
6-19-87
P & A