1. oil

(Do not use this form for proposals to reservoir. Use Form 9-331-C for such p

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

4. LOCATION OF WELL (REPOR

AT SURFACE: 990 FNL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other)

## NM OIL CONS. COMMISSION

Drawer DD

Form Approved. Budget Bureau No. 42-R1424 C/5F

## UNITED STATESsia. NM 88210

DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY	5. LEASE  NM-X27279  6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS  not use this form for proposals to drill or to deepen or plug back to a different revoir. Use Form 9-331-C for such proposals.)  oil	7. UNIT AGREEMENT NAME RECEIVED BY  8. FARM OR LEASE NAME OCT 06 1983  Elliott #ed.  9. WELL NO.  4 ARTESIA, OFFICE  10. EFFLD OF WILDCAT NAME
ADDRESS OF OPERATOR  P.O. Dr. 217, Artesia, N.M. 88210  LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  AT SURFACE: 990 FNL 990 FWL  AT TOP PROD. INTERVAL: Same  AT TOTAL DEPTH: Same	Benson Queen Grbg North  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  Sec. 28-T18S-R30E  12. COUNTY OR PARISH 13. STATE  Eddy N.M.  14. API NO.
CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  QUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  IT WATER SHUT-OFF	15. ELEVATIONS (SHOW DF, KDB, AND WD)  3440' GR  (NOTE: Report results of multiple completion zone change on Form 9-330)

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.)\*

We propose to plug and abandon this well as follows: Set a plug from 2750-3140', 50' above & below perfs and tag; set a plug from 1200-1500'; set a plug from 220-520'; set a 50' plug @ surface, install dry hole marker.

Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
18. I hereby certify that the foregoing is true and correct  SIGNED AIRL Production Clerk DATE	9/2/83
APPROVED (This space for Federal or State office use)	
(Orig. Sgd.) PETER W. CHESTER APPROVED BY CONDITIONS OF APPROVAL, IF ANY:  DATE	-