

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

MAR 26 1992

MAR 25 11 31 AM '92

SUNDRY NOTICES AND REPORTS ON WELLS O. C. D.

ARTESIA OFFICE

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other Temporarily Abandoned

2. Name of Operator

Marathon Oil Company /

3. Address and Telephone No.

P.O. Box 1324, Artesia, NM 88210 (505)457-2621

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit ; 1650' FSL and 1650' FWL; Sec 28-T21S-R24E

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

5. Lease Designation and Serial No.

NM-030482

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Indian Hills Unit

8. Well Name and No.

Indian Hills Unit #4

9. API Well No.

30015107380000

10. Field and Pool, or Exploratory Area

Indian Basin Upper Penn

11. County or Parish, State

Eddy County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other Request T.A. Status

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

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

13. 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.)\*

- 1) On February 18 this year the above mentioned well was tested for casing integrity.
- 2) The test proved integrity as witnessed by Mr. D. Whitlock.
- 3) We would like to request temporary abandonment status on this well.
- 4) Attached is a copy of the test chart.

APPROVED FOR 12 MONTH PERIOD  
ENDING 04-01-93

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

Signed Noel R. Daza

Title Plant Superintendent

Date 3/23/92

(This space for Federal or State office use)

Approved by David P. Glass  
Conditions of approval, if any:

Title

Date 3-27-92

