

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(Other in- tions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-31424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0384625

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

---

7. UNIT AGREEMENT NAME

---

8. FARM OR LEASE NAME

Fed. IBD Gas "Com"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Indian Basin Upper Penn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 30-21S-23E

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Marathon Oil Company

3. ADDRESS OF OPERATOR  
P. O. Box 220, Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface

1650' FSL and 1650' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GL 4323'

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Status report

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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 continues to be temporarily abandoned. Status of well will again be reported prior to or not later than six months from date of this report.

RECEIVED

APR 12 1967

G. G. B.  
ARTESIA, OFFICE

RECEIVED  
APR 7 1967  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

*[Signature]*

TITLE

Area Supt.

DATE

4-5-67

(This space for Federal or State office use)

TITLE

DATE

APPROVED  
APR 11 1967  
R. L. BEEKMAN  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side