

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRICATE\*  
(Other instruct on re-verse side)

Form approved.  
Budget Bureau No. 42-R142  
5. LEASE DESIGNATION AND SERIAL NO.

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.)

RECEIVED

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 7068	
2. NAME OF OPERATOR Monsanto Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 1330 Midland NBT, Midland, Tx. 79701		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 1600' FNL & 1980' FEL		8. FARM OR LEASE NAME Miller Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3199 DF		10. FIELD AND POOL, OR WILDCAT Burton Flat-Morrow Atoka	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T-21S, R-27E	
		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:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <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.) \*

- 1) Set 50 Sxs plug on top of Perm Latch Packer.
- 2) Set CIBP @ 10,300' with 50 Sxs on top.
- 3) If 5 1/2" casing is cut off below 8760', set 150' plug 75' in casing, 75' out of stub. Then set 150' plug (8760'-8610'). If cut off above 8760', spot 150' plug, 75' in casing 75' out of stub.
- 4) Set 150' plug @ 7000'.
- 5) Set 150' plug top of Bone Springs (5160'-5010').
- 6) Set 100' plug 50' in and 50' out of 9 5/8 casing @ 2788'.
- 7) 15 Sx plug at surface with 4 ft. marker.

Work will start approximately 11/15/80

RECEIVED

SEP 17 1980

U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED Peter C. Roberts

TITLE Regional Prod. Engr.

DATE 9/11/80

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER

TITLE ACTING DISTRICT ENGINEER

DATE OCT 20 1980

CONDITIONS OF APPROVAL, IF ANY: