## INTOF THE INTERIOR (Other Instruction re-DEPARTI

Form approved. Budget Bureau No. 42-R1424.

GEOLOGICAL SURVEY  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.)			NM-9534A
			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1. OIL [] GAS [] DI HCCED AND ARANDONED			7. UNIT AGREEMENT NAME
WELL WELL OTHER TENDED AND ADMINUTED OF OPERATOR RECEIVED			SITTING BULL UNIT
INEXCO OIL COMPANY			SITTING BULL U
ADDRESS OF OPERATOR		FFD 1 / 1070	9. WELL NO.
106 Mid America Building, Midland, Texas 79701 FEB 1 6 1973  LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			10. FIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface	celearly and in accordance with any		WILDCAT
<u> </u>		O. C. C. Artesia, office	11. SEC., T., B., M., OE BLK. AND : SURVEY OR AREA
			SEC. 4, T-24S, R-22E
4. PERMIT NO.	15. ELEVATIONS (Show whether DF	, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	5412' GR		EDDY NEW MEXIC
3. Check A	Appropriate Box To Indicate N	lature of Notice, Report, or	Other Data
NOTICE OF INT			QUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT* X
REPAIR WELL (Other)	CHANGE PLANS	(Other) (Note: Report result	ts of multiple completion on Well
7. DESCRIBE PROPOSED OR COMPLETED O	PERATIONS (Clearly state all pertinen	Completion or Recom	pletion Report and Log form.)
proposed work. If well is direc nent to this work.) *	tionally drilled, give subsurface local	tions and measured and true verti	cal depths for all markers and zones perti-
NTENTION TO PLUG AND A	sk cement plugs at fo 5880-98 5150-25 4400-45 2900-30 1630-17 20 sx top plu BANDON APPROVED BY MR	<b>n</b> 0 00 00 30 g & marker . R. L. BEEKMAN ON N	OPEMBER 1, 1972.
SIGNED Stu Consider that the foregoing		TROLEUM ENGINEER	DATE 11-3-72
JOHN IR. BARRIOS (This space for Federal or State of	fice use)		
APPROVED BY TITLE			DATIV
CONDITIONS OF APPROVAL IF	ANY:		DATE
FEB 15 15 15 15 15 15 15 15 15 15 15 15 15	*See Instructions	on Reverse Side	
ACTING DISTRIC			

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