

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP
(Other instruction
verse side)

TE
re

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

45F

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.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <u>Dry</u>	5. LEASE DESIGNATION AND SERIAL NO. <u>NM-19422</u>
2. NAME OF OPERATOR <u>Mayne & Mertz, Inc.</u>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>P. O. Box 183, Midland, TX 79702</u>	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 <u>1673' FWL & 660' FSL of Sec.</u>	8. FARM OR LEASE NAME <u>Bluewater-Federal</u>
14. PERMIT NO. <u>30-015-24641</u>	9. WELL NO. <u>1</u>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>KDB: 3424'</u>	10. FIELD AND POOL, OR WILDCAT <u>West Dark Canyon Delaware</u>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 18, T-25-S, R-26-E</u>
	12. COUNTY OR PARISH <u>Eddy</u>
	13. STATE <u>New Mexico</u>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

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.)*

See Attachment

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

SIGNED <u>Rayne Mayne</u>	TITLE <u>President</u>	DATE <u>2/3/86</u>
(This space for Federal or State office use)		
APPROVED BY <u>[Signature]</u>	TITLE <u></u>	DATE <u>3/16/86</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

Form 3160-5 Attachment
Mayne & Mertz, Inc.
Bluewater-Federal No. 1
January 31, 1986

Plugged and abandoned as follows:

- 1.) Displaced hole w/ 10 ppg brine water.
- 2.) Set cmt plugs from 4785' to 4585' and 3662' to 3562'.
- 3.) Cut off 4-1/2" csg @ 2600' (w/ acid cutter) and pulled.
- 4.) Set cmt plug across csg-cut from 2650' to 2525', tagged cmt top @ 2525'.
- 5.) Set cmt plug across 8-5/8" csg shoe from 1650' to 1550', tagged cmt top @ 1550', pumped 15 sacks cmt on top of plug.
- 6.) Set 50' cmt plug at surface.
- 7.) Set 8-5/8" dry hole marker, cut anchors off below ground level, filled pits and cleaned location.

Date plugging operations began: 1/17/86

Date plugging operations completed: 1/22/86

Date plugging procedure approved: 12/11/85

Casing remaining in hole: 2456' of 4-1/2"
1596' of 8-5/8"
281' of 13-3/8"