

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPL  
(Other instructions  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		RECEIVED AUG 9 1976 U. S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO		5. LEASE DESIGNATION AND SERIAL NO. NM - 0503	
2. NAME OF OPERATOR TEMLCO INC.				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 728 - Hobbs, New Mexico		7. UNIT AGREEMENT NAME		8. FARM OR LEASE NAME Cotton Draw Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Well is located 2310' from the North line and 1980' from the West line.		9. WELL NO. 68		10. FIELD AND POOL, OR WILDCAT Paduca Morrow Gas	
14. PERMIT NO. Regular		15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3457' (DF)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, T-25N, R-31-E	
				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:		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"/>
FRACUTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACUTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input 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) Extension		(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.)

## REMARKS:

- Well Status - TR-MG (To Be Reconditioned-Natural Gas)
- Temporary Abandonment Date - December 4, 1975
- Reason for Abandonment - Low gas production makes well uneconomical to produce.
- Future Plans - Remedial work will be performed to open the Atoka formation.
- Date of Future Workover or Plugging - September, 1976

RECEIVED  
AUG 04 1976  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Asst. District Supt.

DATE 8-3-76

(This space for Federal or State office use)

TITLE

DATE

APPROVED BY  
SIGNATURES OF APPROVAL, IF ANY:

APPROVED

AUG 1 1976

L. E. BECKMAN

ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side