

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions
on reverse side)

Form approved,
Budget Bureau No. 42 R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM-0525452-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Alpha Twenty-One Production Company		8. FARM OR LEASE NAME Cities 3 Federal	
3. ADDRESS OF OPERATOR 2100 First National Bank Bldg. - Midland, Texas		9. WELL NO. #4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2033' FNL and 660' FWL, Section 3		10. FIELD AND POOL, OR WILDCAT Wildcat	
14. PERMIT NO. Approved 9/19/72		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3735 GR	
		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 ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) Temporary Abandonment	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) Temporary 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.)*

We respectfully request approval to continue the Temporary Abandonment status of this well. We have a new engineer that needs additional time to evaluate this well.

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

SIGNED Donnae Gourdais TITLE Vice President DATE 11-18-80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: