

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)Form Approved
Budget Item No. 42 01421

5. LEASE DESIGNATION AND SERIAL NO.

SF 077384

6. IF INDIAN, TRIBE 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		Huerfano Unit
3. ADDRESS OF OPERATOR		8. FARM OR LEASE NAME
PO Box 990, Farmington, NM 87401		Huerfano Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		9. WELL NO.
890°N, 860°W		220
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT
15. ELEVATIONS (Show whether BN, RT, GR, etc.)		West Kutz Pictured Cliffs
5957'GL		11. SEC., T., R., NE, SE, SW, AND SURVEY OR AREA
		Sec. 30, T-27-N, R-10-W NMPM
		12. COUNTY OR PARISH
		San Juan
		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)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(Note: Report results of multiple completion on Well Completion or Recompletion Report (see back form).)

17. DESCRIBE PROPOSED OR COMPLETION OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of start of 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.)*

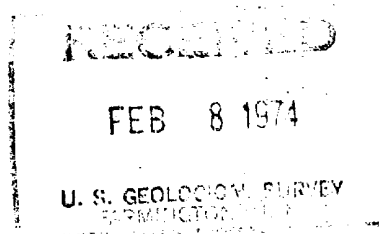
It is proposed to plug and abandon as follows:

Bradenhead squeeze with 25 sks. cement. Displace cement to 120'.

Squeeze Pictured Cliffs perforation with 25 sks. cement down 2 7/8" O.D. casing.
If well goes on vacuum, follow cement with wireline.

Remove wellhead and cement dry hole marker at surface.

Clean up location.



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

SIGNED

TITLE Drilling Clerk

DATE February 8, 1974

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

