

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget/Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-0603-6596

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Owen

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Verde Gallup

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 6, T30N, R15W

12. COUNTY OR PARISH

San Juan

13. STATE

N. Mexico

## 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR M. MARTIN OIL & GAS CO.
3. ADDRESS OF OPERATOR 4706 N. 32nd Place, Phoenix, Arizona	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1870' from the South line & 620' from the West line of Section 8, T30N, R15W, San Juan County, New Mexico
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5430 DF

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"/>

(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.)\*

It is intended to plug and abandon this well in the following manner:

Pull rods, tubing and pump. Shoot 4½" production casing off at approximately 1300 feet and pull.

Run tubing to T.D. and pump 35 sacks of cement through tubing. Place a cement plug in surface with steel pipe showing name and location of well. Clean location. Place a cement plug 50' in and 50' out of pipe stub.

T.D. of well 2100'.

4½" casing at 1915', cemented with 65 sacks.

7" casing at 770', cemented with 175 sacks; cement circulated to surface.

Reason for plugging: Well stopped producing oil and made water only.

Date this work to be done: August 18, 1965.



RECEIVED

AUG 26 1965

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

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

SIGNED

E. A. Clement

TITLE

Agent for M. Martin

DATE

8-16-65

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE