

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0155494-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.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Winkler Federal

9. WELL NO.

14

10. FIELD AND POOL, OR WILDCAT

Cato San Andres

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

29-T8S-R30E

12. COUNTY OR PARISH

Chaves

13. STATE

N.M.

1. OIL WELL  GAS WELL  OTHER Plug & Abandon

2. NAME OF OPERATOR  
Atlantic Richfield Company

3. ADDRESS OF OPERATOR  
P. O. Box 1710, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1980' FSL & 1980' FWL (Unit Letter K)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4102' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Plug & Abandon <input checked="" 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.)\*

On 5/14/75 rigged up, installed BOP. RIH w/bit & scraper to 3200' OK. WIH w/4 1/2" cmt retr, set @ 3200'. Circ hole w/heavy gelled mud. Displaced 45 sx Cl C cmt w/4% gel below retr. Spotted 5 sx on top of retr. POH w/tbg. Cut 4 1/2" OD csg @ 2250', pulled 300' of 4 1/2" csg & WIH w/tbg OE & spotted 50 sx Cl C 4% gel 2175-2300' across 4 1/2" csg stub. POH w/tbg. Pld & recovered 1900' of 4 1/2" csg. (total rec 2250'). WIH w/tbg OE, unable to get below 660'. Spotted 50 sx Cl C Neat 510-660'. Spotted 50 sx Cl C Neat 170-320' across 8-5/8" csg shoe. Spotted 10 sk cmt plug @ surface. Installed regulation dry hole marker. P&A eff 5/17/75. Location to be cleaned of all junk and levelled in accordance w/USGS & BLM stipulations. Final Report.

**RECEIVED**  
OCT 29 1975  
U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED [Signature] TITLE Dist. Drlg. Supv. DATE 5/29/75

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

**APPROVED**  
OCT 29 1975  
A. L. BECKWITH  
DISTRICT ENGINEER