

REVISED

N.M.O.C.D. COPY

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 034961-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Baetz A

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Buffalo Valley-Penn Gas

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

Sec 35, T14S, R27E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

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.)

RECEIVED

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR

Cities Service Company

FEB 18 1980

3. ADDRESS OF OPERATOR

Box 1919 Midland, TX 79702

O. C. D.

ARTESIA, OFFICE

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

660' FSL 1980' FWL, Section 35, T14S, R27E,
Chaves County, NM

14. PERMIT NO.

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

3516' GR

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☒

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

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.)*

TD 9983', PBTD 8354'. We propose to plug & abandon this well as follows:

SEE ATTACHMENTS!

RECEIVED

FEB 15 1980

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Region Oper. Mgr.

DATE 2/12/80

(This space for Federal or State office use)

(Orig. Sgd.) GEORGE H. STEWART

APPROVED BY

TITLE

ACTING DISTRICT ENGINEER

DATE

FEB 15 1980

CONDITIONS OF APPROVAL, IF ANY:

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land, should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

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UNITED STATES
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SUMMARY NOTES AND REPORTS ON WELLS

WELL NO. _____

LOCATION _____

STATE _____

DATE _____

OPERATOR _____

WELL TYPE _____

WELL DEPTH _____

WELL STATUS _____

WELL CONTENTS _____

WELL CLOSING METHOD _____

WELL CONDITIONING METHOD _____

WELL INSPECTION METHOD _____

WELL ABANDONMENT METHOD _____

WELL ABANDONMENT DATE _____

WELL ABANDONMENT REASON _____

WELL ABANDONMENT COMMENTS _____

WELL ABANDONMENT SIGNATURE _____

WELL ABANDONMENT TITLE _____

WELL ABANDONMENT ADDRESS _____

WELL ABANDONMENT CITY _____

WELL ABANDONMENT STATE _____

WELL ABANDONMENT ZIP _____

WELL ABANDONMENT PHONE _____

WELL ABANDONMENT FAX _____

WELL ABANDONMENT EMAIL _____

WELL ABANDONMENT WEBSITE _____

WELL ABANDONMENT SOCIAL MEDIA _____

WELL ABANDONMENT OTHER _____