Form Approved Budget Bureau No 42-R1424

## Drawer DD 88210

UNITED STATES Artesia, NM

L	EASE		

١	4
615	

			- 117 0000
DEPARTMENT	OF	THE	INTERIOR
GEOLOG	ICAL	SUE	RVFY

	N11	01128A		
6.	IF INDIAN, A		RTRIBE	NAME

SUNDRY	NOTICES	AND	REPORTS	ON	<b>WELLS</b>

(Do not use this form for proposals to drill or to deepen or plug back to a reservoir. Use Form 9-331-C for such proposals.) RECEIVED BY 1. oil gas well  $\square_{k}$  $\sqcup$ well other <del>-5 1986</del> 2. NAME OF OPERATOR layton of

9. WELL NO.

3. ADDRESS OF OPERATOR

O. C. D. ARTESIA, OFFICE

P.o. Box 2035 Roswell, New Mexico 8820 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE:

AT TOP PROD. INTERVAL: AT TOTAL DEPTH:

10. FIELD OR WILDCAT NAME Coyote Queen

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

DeKalb A Fed

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

17-11S 27E

12. COUNTY OR PARISH 13. STATE Chaves N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES

SUBSEQUENT REPORT OF:

(other) for emergency pit. 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.)\*

12/02/86

ABANDON\*

Request permission for emergency pit.

Subsurface Safety Valve: Manu. and	d Туре		Set @	Ft.
18. I hereby certify that the foregoi	ng is true and correct			
SIGNED Celler hay &	y Nw TITLE Agent	DATE	<del>2/86</del>	
/	(This space for Federal or Stat	<del></del>		
Subsurface Safety Valve: Manu. a  18. I hereby certify that the force signed Court Day  APPROVED BY CONDITIONS OF APPROVAL, IF ANY			PPKOVED R W. CHESTE	R +
			EC 3 1986	

\*See Instructions on Reverse Side

BUREAU OF LAND MANAGEMENT ROSWELL RESOURCE AREA