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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

APR 23 12 01 PM '69

5a. Indicate Type of Lease

State ☐   Fee ☒

5. State Oil & Gas Lease No.
--

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 —" (FORM C-101) FOR SUCH PROPOSALS.)

1.
OIL WELL ☐   GAS WELL ☐   OTHER. Dry Hole

7. Unit Agreement Name
--

2. Name of Operator

McGrath & Smith, Inc.

8. Farm or Lease Name
Wright A

3. Address of Operator

418 Building of Southwest, Midland, Texas 79701

9. Well No.
1

4. Location of Well

UNIT LETTER B , 1980 FEET FROM THE E LINE AND 660 FEET FROM

THE N LINE, SECTION 26 TOWNSHIP 9-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat
Undesignated

15. Elevation (Show whether DF, RT, GR, etc.)
GL 4191   KB 4203

12. County
Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐   PLUG AND ABANDON ☒

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐   CHANGE PLANS ☐

OTHER _____ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐   ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐   PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER _____ ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Ran 2-3/8 Tbg. spotted 35 sx. cmt. in 5½ from 9494-9846
Cut 5½ csg. at 7991 - stuck. Cut 5½ at 6492' came free
Spotted 25 sx. cmt. 6492'
Spotted 25 sx. 5370-5445'
Spotted 25 sx. cmt. 3973-4048'
Cut 8-5/8 csg. at 1295' - spotted 25 sx. cmt. 1104-1290'. Pulled 13-3/8
Spotted 25 sx. cmt. from 345-400'
Spotted 10 sx. cmt. top of 13-3/8
Installed steel plate in top 13-3/8 and installed marker
P & A complete 6 p.m. 4-16-69.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED _____   TITLE Engineer   DATE April 21, 1969

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: