

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPE
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0145685

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

HORTON FEDERAL

9. WELL NO.

23

10. FIELD AND POOL, OR WILDCAT

MILNE SAND-SAN ANDRES

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

31-8-35 NM PM

12. COUNTY OR PARISH

ROOSEVELT

13. STATE

N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
AMOCO PRODUCTION COMPANY

3. ADDRESS OF OPERATOR
BOX 367, ANDREWS, TEXAS 79714

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

330' FNL; 660' FWL Sec. 31 (Unit D, NW 1/4 NW 1/4)

14. PERMIT NO.

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

4226' R.D.B.

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*

Will Status

(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.)*

This well was shut-in 6-11-75 and was producing all water.

Well to remain in status pending evaluations of pressure maintenance project on lease. And further use in project. Well needed to complete pattern and will be restored to production when response occurs.

This approval of temporary abandonment expires AUG 28 1976

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

SIGNED

Roy G. Quakum

TITLE

ADMINISTRATIVE ASSISTANT

DATE

AUG 28 1975

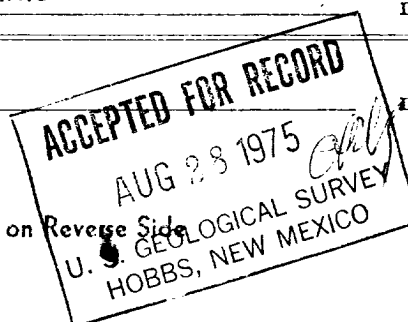
(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side

044- USGS- H
1- DIV
1- SUSP
1- RRY