

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Mims Texas Oil & Gas Co.	8. FARM OR LEASE NAME Federal 23
3. ADDRESS OF OPERATOR Box 13 Milnesand, New Mexico. 88125	9. WELL NO. #0
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface SEE # 17 660/E + 1980/S	10. FIELD AND POOL, OR WILDCAT Chavezroo San Andres
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEE # 17 23-7-33	12. COUNTY OR PARISH Roosevelt
	13. STATE N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) Temporary Abandonment	<input checked="" type="checkbox"/>
(Other)	<input 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.) *

This is a notice of temporary abandonment of well:

8 NESE23 T 7S R 33E

4 1/2 C1BP Set at 4030'

30' Sand poured on top.

We are intending to use this in our plans for water flood.

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

SIGNED Gabriel J. Luman TITLE Agent DATE 9-26-01

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR 12 MONTH PERIOD
ENDING NOV 3 1990
See Instructions on Reverse Side

APPROVED
DATE PETER W. CHESTER
NOV 3 1989
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

RECEIVED

NOV 6 1989

OCD
HOBBS OFFICE

SUNDAY

