

**NEW MEXICO OIL CONS. COMMISSION**  
**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPL  
(Other instructions  
verse side)

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER                                                                                   | RECEIVED BY<br><b>MAY 14 1984</b>                                | 5. LEASE DESIGNATION AND SERIAL NO.<br><b>29-002915</b>               |
| 2. NAME OF OPERATOR<br><b>Memument Resources, Inc.</b>                                                                                                                                             | <b>O. C. D.</b><br><b>ARTESIA, OFFICE</b>                        | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                  |
| 3. ADDRESS OF OPERATOR<br><b>Box 1476 Lovington, New Mexico</b>                                                                                                                                    |                                                                  | 7. UNIT AGREEMENT NAME                                                |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br><b>1830' FNL - 660' FEL</b><br><b>SEC 20 - 8-S - 36E</b> |                                                                  | 8. FARM OR LEASE NAME<br><b>Petroleum Federal</b>                     |
|                                                                                                                                                                                                    |                                                                  | 9. WELL NO.<br><b>1</b>                                               |
|                                                                                                                                                                                                    |                                                                  | 10. FIELD AND POOL, OR WILDCAT<br><b>PRARIE DEVONIAN</b>              |
|                                                                                                                                                                                                    |                                                                  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br><b>20-8-S-36E</b> |
| 14. PERMIT NO.                                                                                                                                                                                     | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br><b>KB 4124</b> | 12. COUNTY OR PARISH<br><b>Revere IT</b>                              |
|                                                                                                                                                                                                    |                                                                  | 13. STATE<br><b>New Mex</b>                                           |

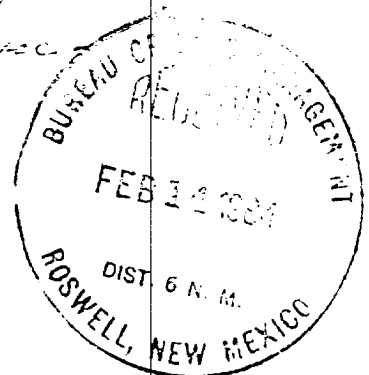
**Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

| NOTICE OF INTENTION TO:                      |                                               | SUBSEQUENT REPORT OF:                          |                                          |
|----------------------------------------------|-----------------------------------------------|------------------------------------------------|------------------------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>        | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETION <input type="checkbox"/>  | FRACTURE TREATMENT <input type="checkbox"/>    | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input checked="" type="checkbox"/>  | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/>    |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) <input 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.)

Have on to Plug & Abandon Well - Casing Problems @ 6140 and due to expense to Repair - well would be intentionally to produce.  
Method of setting Cement Plug is to Perforate 5 1/2 Casing as close to Casing joint as possible - set Cement Retainer and Squeeze - Perforate 5 1/2 Casing @ 4370 and set Cement Retainer and Squeeze - Place Cement Plug @ 520 to 420 both inside and outside of 5 1/2 Casing. Place 50' Cement Plug @ Surface.



I hereby certify that the foregoing is true and correct:

**APPROVED**

**PETER W. CHESTER**

**MAY 8 1984**

TITLE **Production Permit** DATE **2-5-84**

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

See Instructions on Reverse Side

RECEIVED  
MAY 21 1984  
O.C.D.  
HOBBS OFFICE