

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLE
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM0560261

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.)

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

2. NAME OF OPERATOR
The Desana Corporation

3. ADDRESS OF OPERATOR
610 Vaughn Building, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980 FSL, 660 FWL Section 8
T-8-S, R-38-E

14. PERMIT NO.
3994.9GR

15. ELEVATIONS (Show whether DF, RT, GR, etc.) NEW MEXICO
3994.9GR

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal 8

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Bluitt (S.A.) Assoc.

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 8, 8S - 38E

12. COUNTY OR PARISH
Roosevelt

13. STATE
New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	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.)*

PLUGGING PROGRAM:

Displaced fluid in hole with mud consisting of 25 sacks of gel to 100 bbls. of brine

1st Plug - Cast iron plug set with wire line at 4600' with 20' (5 sx.) of cement on top.

2nd Plug - 1700' to 2100' (65 sx. cement)

3rd Plug - 420' to 520' (25 sx. cement) in and out of bottom of surface casing.

4th Plug - 10 sx. cement in top of surface casing

Cemented 4" pipe into top plug, 4 feet above surface.

Beaded on side of pipe "L-8-38".

Note: Casing was cut & pulled ^{from 4003'} after first plug was set. The hole apparently caved in and the above plugging procedure was approved by U.S.G.S. Field Representative.

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

SIGNED Tom R. Cook

TITLE Production Superintendent DATE March 28, 1974

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____