

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP DATE*
(Other instruction A re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back a well. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		AUG 1 1966	
2. NAME OF OPERATOR TEXACO Inc.		C. C. C.	
3. ADDRESS OF OPERATOR P. O. Box 728.- Hobbs, New Mexico		ARTESIA, OFFICE	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface This well is located 660' from the South Line, and 660' from the West Line of Section 34, T-15-S, R-30-E, Chaves County, New Mexico.		5. LEASE DESIGNATION AND SERIAL NO. Artesia - NM 01171	
14. PERMIT NO. Regular		6. IF INDIAN, ALLOTTED OR TRIBE NAME NONE	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4028' (D. F.)		7. UNIT AGREEMENT NAME NONE	
		8. FARM OR LEASE NAME K. McIntosh Federal	
		9. WELL NO. 1	
		10. FIELD AND POOL, OR WILDCAT Henshaw West Grayburg	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34, T-15-S, R-30-E	
		12. COUNTY OR PARISH Chaves	
		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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDISE <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"/>	

(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.)*

We propose to plug and abandon subject well as follows:

1. Pull pump equipment, mud up hole.
2. Spot Plug Number 1, 25 Sx. from total depth of 3327' to 3075'.
3. Cut off and recover 4 1/2" O. D. Casing.
4. Spot Plug Number 2, 20 Sx. from 50' above and below the cut off of 4 1/2" Casing.
5. Spot Plug Number 3, 25 Sx. from 50' above and below seat of 7 5/8" Casing.
6. Spot Plug Number 4, 15 Sx. from 0' to 50', surface plug. Install 4" O. D. marker extending 4' above ground level. Clean location for inspection by the U. S. Geological Survey Office, Artesia, New Mexico. Plug and abandon to be complete on or about August 15, 1966.

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

SIGNED

J. G. Plevins, Jr.

(This space for Federal or State office use)

TITLE Assistant District

Superintendent

DATE July 28, 1966

TITLE

DATE

APPROVED BY

JUL 29 1966

H. L. DEAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side