REC	EIVED	禁				Form Approved.	
DEC	9 1982		D STATES OF THE INT	NM OIL CON Drawer DD E RMOR thia, H		Budget Bureau No. 42-R1424 5. LEASE LC-070337	
_	Ċ. D.	GEOLOGI	CAL SURVE	Y		6. IF INDIAN, ALLOTTEF OR TRIBE NAME	
	1. oil well 2. NAME OF General 3. ADDRESS	gas well ot OPERATOR OF OPERATORSu Fo	Inaction to deepen Inaction water water ompany ite 1007 Rrt Worth,	TS ON WELLS or plug back to a different ve Injection Well didglea Bank Bldg Texas _76116 CLEARLY. See space 17		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
	AT TOP F	below.) AT SURFACE: 1980' FSL and 660' FWL AT TOP PROD. INTERVAL: Section 10-T14S-R31E AT TOTAL DEPTH:				10-14S-31E, NMPM 12. COUNTY OR PARISH 13. STATE Chaves New Mexico 14. API NO.	
		CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA			OTICE,	15. ELEVATIONS (SHOW DF, KDR AND WD) 4233' DF	
	TEST WATER FRACTURE TI SHOOT OR A REPAIR WELL PULL OR AL MULTIPLE CO CHANGE ZON ABANDON*	REAT CIDIZE COMPLETE COMPLICATE COMPLETE COMPLICATE COMPLETE COMPLICATE COMPLETE COMPLETE COMPLETE COMPLETE COMPLETE COMPLETE COM		QUENT REPORT (OF:	(NOTE: Report results of multiple completion or zone change on Form 9-330.) (1-0) 6 1982	
	17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent date including estimated date of starting any proposed work. If well is directionally drilled, we subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* General Operating Company proposes to permanently plug and abandon Drickey Queen Sand Unit Tract 10 Well No. 3, an inactive water injection well, in the following manner: (1) Spot 100' cement plug from 2750'-2650' inside 5-1/2" OD casing. (2) Fill 5-1/2" OD casing from 2650'-1250' with mud laden fluid. (3) Perforate 5-1/2" OD casing at 1250'. (4) Cement inside and outside of 5-1/2" OD casing from surface to 1250' (5) Install well marker, cut off anchors, and clean up location. This work is scheduled to commence during the week of December 6,						
	18. I hereby SIGNED C.	CERTIFY that the fore W. Stumboffe APPROVAL, IF AN DEC	egoing is true and	nd correct	esiden		
		FOR JAMES A. (DISTRICT SU		*See Instructions on	n Reverse	e Side	

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