

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions
reverse side)Form approved
Bulfinch Bureau No. 42-R1414

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NO.	
(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.)		NY-0174830-A	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTED OR TRIBE NAME	
2. NAME OF OPERATOR Atlantic Richfield Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 1978, Roswell, New Mexico 88201		8. FARM OR LEASE NAME Mona Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FEL, 660' FSL (Unit Letter O)		9. WELL NO. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Tobac-Penn.	
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 4403' DF		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T-8S, R-33E	
		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 ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" 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.)*

This well has been plugged and abandoned in the following manner:

Set Baker CIBP @ 8880' WLM. Capped w/30' of cement, using dump bailer, from 8850' to 8880'. While attempting to pull 4-1/2" casing, casing parted @ 3667'. Pld out of hole w/115 jts of 4-1/2" casing. Spotted 60 sk cement plug from 3500-3667; spotted 10 sk cement plug from surface to 30'. 10#/gal salt gel mud was left between all plugs. Erected regulation dry hole marker. Well P & A 5/6/69.

This change in program was verbally approved by Mr. A. R. Brown on May 6, 1969. We will notify your office by letter when this location is ready for inspection.

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

SIGNED W. D. Smith

TITLE Dist. Drlg. Supervisor DATE 5-9-69

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ **APPROVED** DATE _____

MAY 14 1970

*See Instructions on Reverse Side

J. L. GORDON
ACTING DISTRICT ENGINEER

RECEIVED

MAY 19 1970

OIL CONSERVATION COMM.
HOBBS, N. M.