

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

New Mexico 0403741B

6. INDIAN, ALLOTTEE OR TRIBE NAME

NR0000 - APPLICANT
NR0000 - SUNDRY NOTICES AND REPORTS ON WELLS
BLM - BUREAU OF LAND MANAGEMENT

(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.)

DEC 20 11 16 AM '66

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Dry hole		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR H. L. Brown, Jr.		8. FARM OR LEASE NAME Atlantic Federal	
3. ADDRESS OF OPERATOR 704 Vaughn Building, Midland, Texas		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL & 1980' FWL of Sec. 3, T8S, R31E		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T-8-S, R-31-E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4291.8' GR	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 was plugged and abandoned on October 13, 1966 as follows:

Set a 15-sack cement plug at 3920-3726';
Cut off 4-1/2" casing with wireline casing cutter at 2720' and set a 25-sack cement plug at 2850-2668';
Set a 25-sack cement plug from 371-287';
set a 10-sack cement plug at the surface 31-0'.

Hole was filled with 8.9# mud.

Notification will be given as soon as well site has been cleared and conditioned for final inspection.

RECEIVED
OCT 17 1966
U. S. GEOLOGICAL SURVEY
ROCKWELL, NEW MEXICO

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

SIGNED R. Busby TITLE Agent DATE Oct. 14, 1966

(This space is for State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

DEC 19 1966

J. W. SUTHERLAND
DISTRICT ENGINEER

*See Instructions on Reverse Side