FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

IN. M. U. U. U. CUPT

UNSTED STATES SUBMIT IN TRIPY
DEPARTME. OF THE INTERIOR (Other Instruction verse side)

ATE*

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Temporarily Abandon

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

GEOLOGICAL SURVEY

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

Mr. 0246269 (b)

NM 0340302 (D)								
6.	IF	INDI.	AN, A	LLOTTEE	OR	TRIBE	NAME	
			4	j.				

ALTERING CASING

ABANDONMENT*

	(Do not use this form for proposa	CES AND REPORTS ON uls to drill or to deepen or plug back to TION FOR PERMIT—" for such proposa	o a different reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
ī.	OIL X GAS OTHER			7. UNIT AGREEMENT NAME
2 .	NAME OF OPERATOR	8. FARM OR LEASE NAME		
	Atlantic Richfield	Company		Woodman Federal
3.	ADDRESS OF OPERATOR			9. WELL NO.
	P. O. Box 1710, Hol	1		
	LOCATION OF WELL (Report location cl See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Cato San Andres		
	1980' FNL & 660' F	EL (Unit Letter H)	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA	
				28-T8S-R30E
14.	PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, G	R, etc.)	12. COUNTY OR PARISH 13. STATE
		4148'GR		Chaves N.M.
16.	Check Ap	propriate Box To Indicate Natur	e of Notice, Report, (or Other Data
	NOTICE OF INTEN	SSEQUENT REPORT OF:		
	TEST WATER SHUT-OFF	ULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL

(Nore: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) 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.)*

The above well was temporarily abandoned during the month of November, 1973. Well is uneconomical to produce. Proposed plans are to plug and abandon well within six months depending on availability of casing pulling unit.

RECEIVED

OCT 3 0 1974

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

	AKIL	
18. I hereby certify that the foregoing is true and cor	rect	DATE October 31, 197
(This space for Federal of State office use) APPROVED BY BOND TIONS OF APPROVAL, IF ANY: UNLESS FURT UNLESS FURT BE PUT TO BE BE PUT TO BE BE PUT TO BE	HER APPHOLE WELL MUST OR PLUGGED BY T 1 - 1975 *See Instructions on Reverse Side	DATE