

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLI
(Other instructions
verse side)B*
re-Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0346362 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Woodman Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Cato-San Andres

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 28, T8S, R30E

12. COUNTY OR PARISH

Chaves

13. STATE

N.M.

SUNDRY NOTICES AND REPORTS ON WELLS

(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.)

1.

OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Atlantic Richfield Company

3. ADDRESS OF OPERATOR

P. O. Box 1710, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FNL & 1980' FEL (Unit letter G)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4145' GR

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

Temporarily Abandon ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

Production from this well has declined to 2 BOPD & it is no longer economical to produce. No remedial possibilities exist. We propose to T.A. by pulling rods & tubing & capping well w/a 2000# WOG valve. Will hold well for a secondary recovery study.

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

SIGNED

C.D. Bretcher

TITLE District Drlg. Supv.

DATE 10/18/73

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

RECEIVED
OCT 19 1973
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICOAPPROVED
OCT 25 1973
L. L. BEEKMAN
ACTING DISTRICT ENGINEER

RECEIVED

OCT 26 1973

O. C. C.
ARTESIA, OFFICE