

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIP DATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                              |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>NM - 034546 - B                 |  |
| 2. NAME OF OPERATOR<br>Southwestern Natural Gas, Inc.                                                                                                         |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                   |  |
| 3. ADDRESS OF OPERATOR<br>900 Building of the Southwest Midland, Texas 79701                                                                                  |  | 7. UNIT AGREEMENT NAME                                                 |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface 1980' FNL & 1980' FEL |  | 8. FARM OR LEASE NAME<br>Federal #24                                   |  |
| 14. PERMIT NO.<br>-----                                                                                                                                       |  | 9. WELL NO.<br>1                                                       |  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>4459' DF                                                                                                    |  | 10. FIELD AND POOL, OR WILDCAT<br>Chaveroo                             |  |
|                                                                                                                                                               |  | 11. SEC. T., R., M., OR E. AND SURVEY OR AREA<br>Sec. 24, T-7-S, R-3-E |  |
|                                                                                                                                                               |  | 12. COUNTY OR PARISH<br>Roosevelt                                      |  |
|                                                                                                                                                               |  | 13. STATE<br>New Mexico                                                |  |

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 checked="" type="checkbox"/>  | SHOOTING OR ACIDIZING <input type="checkbox"/>                                                        | ABANDONMENT* <input 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.)\*

1. Pump 50 sack plug down 4 1/2" casing and displace to 4000'.
2. Free point casing and shoot off at approximately 3700'.
3. Spot 50 sack plug from 3700' to 3500'.
4. Spot 50 sack plug from 1900' to 1774'.
5. Spot 10 sack plug at surface, remove casing head and set mark.

This well is to be abandoned due to 100% water production from the San Andres pay zone. Well was depleted as of October 31, 1968.

|                                                             |                      |              |  |
|-------------------------------------------------------------|----------------------|--------------|--|
| 18. I hereby certify that the foregoing is true and correct |                      | DATE 2/11/69 |  |
| SIGNED <i>James M. Cameron</i>                              | TITLE Office Manager |              |  |
| (This space for Federal or State office use)                |                      |              |  |
| APPROVED BY                                                 |                      | TITLE        |  |
| CONDITIONS OF APPROVAL, IF ANY:                             |                      |              |  |

APPROVED

FEB 13 1969  
ARTHUR R. BROWN  
ENGINEER

\*See Instructions on Reverse Side