

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE  
(Other instructions on  
reverse side)

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

LC 059576

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Injection Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR Chevron Oil Company		7. UNIT AGREEMENT NAME Maljamar (Grayburg)
3. ADDRESS OF OPERATOR P. O. Box 1660, Midland, Texas 79701		8. FARM OR LEASE NAME Maljamar Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit P, 660' FSL, 660' FEL, Section 3, T-17-S, R-32-E, NMPM		9. WELL NO. 13
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Maljamar Grayburg-San Andres
15. ELEVATIONS (Show whether DF, RT, CR, etc.) GR 4203		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T-17-S, R-32-E NMPM
		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	<input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	<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.) \*

Filed in accordance with the New Mexico Oil Conservation Commission letter dated September 13, 1974, regarding notification of status of inactive wells.

The temporary abandonment of this injection well commenced on December 18, 1969 due to lack of response to water injection. Present plans call for this well to be plugged and abandoned by November 1, 1976.

NOV 1 1976

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

SIGNED W. A. Goudeau TITLE Area Supervisor

DATE Oct. 17, 1975

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

**APPROVED**

OCT 23 1975

JIM SIMS  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side