Form 9-331 (May 1963)	UNITO STATES		IN TRIPLICATES *	Form appro Budget Bur	wed. wau No. 42-R1424.
	DEPARTMENT F THE IN GEOLOGICAL SURV	I EKIOK verse alde		9. LEASH LUMMINATIO	
	JNDRY NOTICES AND REPO	ir plug back to a differen		0. IF INDIAN, ALLOTT	EE OR TRIBE NAME
	L OTHER		•	Maljamar Gray	
2. NAME OF OPERATOR Standard	8. FARM OR LEASE NAME Maljamar Grayburg Unit				
3. ADDRESS OF OPERA P. O. BOX	9. WELL NO.				
4. LOCATION OF WELL See also space 17 At surface	10. FIELD AND POOL, OR WILDCAT Maljamar				
Unit T-17	11. SEC., T., R., M., OR BLX. AND SURVEY OR AREA 3-T-17S-R-32E				
14. PERMIT NO.	15. ELEVATIONS (Show wh			12. COUNTY OR PARIS	0H 13. STATE
	4272.	5 Gr.		Lea	N.M.
16.	Check Appropriate Box To Indi	cate Nature of Notic		Other Data	

NOTICE OF INTENTION IV.	SUBSEQUENT REPORT OF:		
			<u> </u>
TEST WATER SHUT-OFF PULL OR ALTER CASING		WATER SHUT-OFF REPAIRING WELL	
FRACTURE TREAT MULTIPLE COMPLETE		FRACTURE TREATMENT ALTERING CASING	
SHOOT OR ACIDIZE ABANDON*		SHOOTING OR ACIDIZING ABANDONMENT*	
REPAIR WELL CHANGE PLANS		(Other)	
(Other) Temporarily Abandon	X	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	1

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.) *

We would like to defer permanent abandonment of this well until the expansion of this waterflood is completed.

The Maljamar Grayburg Unit No. 3 is safely cased and controlled and periodically checked by field personnel. No hazard will be created by deferring abandonment.

Request approval to leave this well temporarily abandoned.

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MAY 1, 1970, STANDARD OIL COMPANY OF TEXAS IS CHANG-ING ITS OPERATING NAME TO CHEVRON OIL COMPANY.

18. I hereby certify that the forgoing is true and correct		
SIGNED R. S. Roberts	TITLE Area Production Engineer	DATE2-10-70
(This space for Federal or State office use)		
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE

*See Instructions on Reverse Side