UNITED (TES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

	5. LEASE LC-057210
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNIT AGREEMENT NAME
nt 	8. FARM OR LEASE NAME
_	9. WELL NO. 117
_	10. FIELD OR WILDCAT NAME MILT. G-SA Repress
7	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
, 	50C. 28 7-175, R-32E 12. COUNTY OR PARISH 13. STATE
	Led N.M.
	14. API NO.

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a differer reservoir. Use Form 9–331–C for such proposals.) oil gas well 🔀 well other 2. NAME OF OPERATOR Oil Company 3. ADDRESS OF OPERATOR BOX 460 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 AT SURFACE: 660 FNL + 1980 FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 4000 REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone PULL OR ALTER CASING change on Form 9-330.) MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) Inst. 4" FI C59 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.)*

Recent Testing and A Casing Inspection Log Indicated holes
and Extremely Bod Pitting in the 5th Reduction (59, IT) Proposed to Install A Full String of 4" (sg To The Topof The Grayburg 6th Zone Which is 160" Bolow The Existing Cosing Shoe. Installing NOW asing will Eliminate Future Problems With The 5 Production String. 1. Lord or Kill well and Pull Pred. Equip. 2. Close out To PBTD I 4089 3. Run The wopen Holo Bridge Plug Sot AT = 3710: 4. Run 3750' 4" Flust JOINT CSG and CMT W/ 2005x Ches "C"CMT and 2% CACL2 5. Drill out Flort store and Coller, Prossure Tost To 500 PSI.
Drill out BP and Push To T. D. and Circulate Holo, Parun Prod. Equip. Subsurface Safety Valve: Manu. and Type _ 18. I hereby certify that the foregoing is true and correct MA DUREMUNET DATE WILLIAM (This space for Federal or State office use) APPROVED BY

*See Instructions on Reverse Side USGS-5, MCA Parlners-4, File

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DISTRICT ENGINEER

RECEI TED

SEP 1977

GIL CONSERVATION COMM. HOBBS, N. M.