	UNIT STATES	SUBMIT IN TRIPLIC.	Form ap Budget	proved. Bureau No. 42-R1424.	
DEFACTMENT OF THE INTERIOR verse side)				5. LEASE DESIGNATION AND SERIAL NO.	
GEOLOGICAL SURVEY				NM-12412	
(Do not use this form for propos Use "APPLICA	ICES AND REPOR	RTS ON WELLS plug back to a different reservoir. such proposals.)	6. IF INDIAN, ALL	OTTEE OR TRIBE NAME	
OIL GAS WELL OTHER			7. UNIT AGREEMEN	NT NAME	
Sun Oil Company			Sloan Fe		
3. ADDRESS OF OPERATOR P.O. Box 1861 Midla	nd Toxas 70702		9. WELL NO.		
4. LOCATION OF WELL (Report location cl See also space 17 below.)	learly and in accordance wit	th any State requirements.*	10. FIELD AND POO	U. OR WILDCAT	
At surface 660' FNL &	FWL of Sec.22,T1	9S, R32E, UT. D	East Lusk-W <sup>11. sec., T, R, M,</sup> <sup>SURVEY OR</sup> Sec.22,T-19	Olfcamp OB BLK. AND ABEA	
14. PERMIT NO.	15. ELEVATIONS (Show whether the state of th		12. COUNTY OR PA	RISH 13. STATE	
	GR 3612, RKB 3	633	Lea	N.M.	
16. Check Ap	propriate Box To Indice	ate Nature of Notice, Report, or	Other Data		
NOTICE OF INTENT		1	EQUENT REPORT OF:		
TEST WATER SHUT-OFF	ULL OR ALTER CASING	WATER SHUT-OFF	REPAIRI	NG WELL	
	ULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERIN	G CASING	
	BANDON*	SHOOTING OR ACIDIZING	ABANDO	NMENT*	
(Other)	HANGE PLANS	(Other) (NOTE: Report resul	its of multiple complet apletion Report and Lo	ion on Well	
<ol> <li>Run &amp; set /" CIB</li> <li>RIH w/2 7/8" tbg Spot 10 Sx Class</li> <li>Spot 70 Sx Class</li> <li>Spot 40 Sx Class</li> <li>25' Cmt plug at s</li> </ol>	r RDG Packer r to 10035' & dur P @ ± 7950 on win to ± 7950. Load H on top of CIBF H inside and out H 2880-2750'. Sp surface.	mp 6 Sx Class H on top reline. d hole w/9.5#/gal. mud	of CIBP laden fluid.	ckers and zones perti-	
	λ. <b>.</b>				
		SEE ATTACHED CONDITION OF AN	) FOR Practic		
18. I hereby county that the forcering is, SIGNED alore hursel	true and correct	Office Assistant	[22] In	01 77	
(This space for Federal or State office		VILLE ASSISTATIC	DATH 12-	-<1-//	
APPROVED BY CONDITIONS OF APPROVAL, IF AN	ጥተጥር እን	ALE ANTHUR R ARTHUR R DISTRICT	BIT ALL		
	*See Instruct	tions on Reverse Side			

RETERIENT SERVATION COMM.

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U. S. GEOLOGICAL SURVEY P. O. Box 1157 Hobbs, New Mexico 88240

Re: Permanent Abandonment

Well: 1 Sloan Federal

## CONDITIONS OF APPROVAL

- 1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal Leases".
- 2. The Hobbs office (telephone (505) 393-3612 is to be notified in sufficient time for a representative to witness all plugging operations.
- 3. Blowout prevention equipment is required.
- 4. Surface restoration after abandonment is to be as stipulated in the "Conditions of Approval" attached to the approved Application for Permit to Drill this well.
- 5. At step 5, if cement on top of bridge plug is placed through tubing, use 35 sacks for plug instead of 10 sacks.



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Form 9-331 (May 1963) DE	UN ED STA	HE INTERIC	SUBMIT IN TRIP (Other instructions verse side)	TE• re- 5.	Form approved Budget Bureau LEASE DESIGNATION A NM-12412	No. 42-R1424.	
	Y NOTICES AND I for proposals to drill or to "APPLICATION FOR PERM	REPORTS O		6.	IF INDIAN, ALLOTTEE	OR TRIBE NAME	
1. 01L [V] GAS []			$\sim$	7.	UNIT AGREEMENT NAI	M B	
2. NAME OF OPERATOR SUN OIL COMPANY				)	8. FARM OR LEANE NAME SLOAN FEDERAL		
4. LOCATION OF WELL (Report	B61, Midland, Texis t location clearly and in acco OF Sec. 22 - Ut.	rdance with any S		VEY 10	WELL NO. 1 D. FIELD AND POOL, OR AST LUSK - W U. BEC., T., B., M., OR B SUPEY OR ABBA	OLFCAMP	
660' FNL & FWL	OF Sec. 22 - Ut.	Letter -D-	H0883	s	ec. 22, T19S	, R32E	
14. PERMIT NO.	15. ELEVATIONS GR 3612		RT, GR, etc.)	12	Lea		
	Check Appropriate Box	To Indicate No				,	
NOTIC	E OF INTENTION TO:		1	UBSEQUENT	BEPORT OF:	c	
TEST WATER SHUT-OFF	PULL OR ALTER CA	SING	WATER SHUT-OFF		REPAIRING W	VELL	
FRACTURE TREAT	MULTIPLE COMPLE		FRACTURE TREATMENT	r	ALTERING CA	SING	
BHOOT OR ACIDIZE	ABANDON+(Temp	) <u>X</u>	SHOOTING OR ACIDIZI	NG	ABANDONMEN	T•	
REPAIR WELL	CHANGE PLANS		(Other)				
(Other)			(Note: Report Completion or I	results of Recompletio	multiple completion n Report and Log for	m.)	
17. DESCRIBE PROPOSED OR COM proposed work. If wel nent to this work.) *	PLETED OPERATIONS (Clearly is directionally drilled, give	state all pertinent subsurface locati	details, and give pertinent ons and measured and true	t dates, inc vertical de	luding estimated dat epths for all markers	e of starting any and zones perti-	
Request to tempora be initiated in th	ry abandon above e Bone Springs Fo	well & hold	d until addition	al comp	oletion proce	dures can	
Wolfcamp formation manently isolated TOC @ 10,575 - PBT	behind a Baker CI	),815) prov [BP set @ 10	ed uneconomical 0,610 w/6 sx. cm	for pro t. plac	oduction & wa ced on top.	is per-	
The Bone Springs f fraced, but produc in the Bone Spring	formation was perf ed verv marginall	v. 10 BO &	22 BW w/gas TST	M. Hov	wever, additi	ional zone:	
This well is prese Plugback completic	ently TA w/2-7/8" on procedures shou	tbg. set @ uld begin b	8648 & master v y October, 1976.	alves (	closed in on	12-8-75.	
This app /57 aband	roval of temporáry onment expires	MAY 1 1	977		i se		
18. I hereby certify that the			oration Analyst		DATE 6-9-	76	
signed han	rea May				DATE V-J-		
(This space for Federal	or State office use)	TITLE		A	PPROV	'ED	
CONDITIONS OF APPR	OVAL, IF ANY:		,		JUN 1 8 19	76	
·	٠	See Instructions	s on Reverse Side	,	BERNARD MORO NG DISTRICT EN		

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and Alfred Lander