

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-046164A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

H. W. Andrews

9. WELL NO.

10

10. FIELD AND POOL, OR WILDCAT

Eumont-Yates 7 R 0

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 23, T-20-S, R-36-E

12. COUNTY OR PARISH

Lea

13. STATE

N M

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Amerada Hess Corporation

3. ADDRESS OF OPERATOR

Drawer "D", Monument, New Mexico 88265

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' from north line and 660' from west line of Sec 23

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

T.A. Extension

XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

Plan To: Test G/SA gas section and if non-productive, P & A.

Request temporarily abandoned status be extended for 1 year.

This copy of report
abandonment engineer
NOV 1 1975

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

SIGNED

[Signature]

TITLE Supver., Admin. Services

DATE 9-30-75

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
DATE

OCT 9 1975

JIM SIMS

TESTING DISTRICT ENGINEER

*See Instructions on Reverse Side