

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

## 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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR C. E. Long		8. FARM OR LEASE NAME Sinclair-Federal	
3. ADDRESS OF OPERATOR Box 1943, Midland, Texas 79701		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FNL & 1650' FWL of Section		10. FIELD AND POOL, OR WILDCAT (Gb- Eunice-Monument SA)	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3633' GR	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 28, T-19-S, R-37-E, NMPM	
		12. COUNTY OR PARISH Lea	
		13. STATE N. M.	

## 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 checked="" type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input 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 checked="" type="checkbox"/> STATUS Report		<input checked="" 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.)\*

This well is temporarily abandoned.

The well is not capable of producing in paying quantities at present. It was temporarily abandoned (shut-in and TA) on 2/8/68.

The well was shut-in because it needed repairs of a major nature after production had dropped to 1 BOPD or less.

Average production when the well was shut-in was; oil - 1 bbl/day, gas - 645 cubic feet/day, water - 17 bbls/day or, possibly, much more since the well would not 'pump-off' and since the water was being put unmeasured into the disposal system.

The well should not be plugged and abandoned because of a number of factors. The produced water came from a sand section below and separated from the oil pay by an interval of at least 12' and perhaps 30'. This should be shut off - the water - by cement squeeze. Most of the acid and fracture treatment is thought to have acted on the water zone through a badly cemented bottom few feet. Operator believes that by squeezing, reperforating the pay section and again fracture treating a commercial producer may be made of this temporarily abandoned hole.

Operator estimates that this well will be back on production on or before May 31, 1977.

2nd This approval of temporary  
abandonment expires 11-1-76

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

SIGNED

*C. E. Long*

TITLE

Owner-operator

DATE

5/27/76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

1978

MAR 14 1978  
OIL CONSERVATION COMM.  
HOBBS, N. M.