(D

## TED STATES OF THE INTERIOR (Other instruct DEPARTM GEOLOGICAL SURVEY

SUBMIT IN TP. TCATE\*

Form approved. Budget Bureau No. 42-R1424

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5.	LEASE	DESIG	NATION	AND	SERIA	L NO.
	LC	-0	3/7	.3	4	L) NAME
6.	IF IND	IAN, A	LLOTTE	E OR	TRIBE	NAME

	SUNDRY NOTICES	AND REPORTS	ON WELLS	
o not	use this form for proposals to		back to a different	

7. UNIT AGREEMENT NAME

	WELL	X	GAS WELL		OTHER	
2.	NAME	OF OPI	CRATOR	_		
	AW(	JUU	PR(	DU	CTION	COMPANY
	$\mathbf{p}$	\ _e\.	~			O 0 111 1 1 1 1

8. FARM OR LEASE NAME

3. ADDRESS OF OPERATOR . /

ANDREWS, TEXAS

GAS WELL

10. FIELD AND POOL, OR WILDCAT

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.

See also space 17 below.)

At surface 330 FNL X1650 FWL SEC. 22 (Unit c)

Eunice - Monument

14. PERMIT NO.

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

22-20-37 12. COUNTY OR PARISH

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

WATER SHUT-OFF FRACTURE TREATMENT

REPAIRING WELL ALTERING CASING

SHOOT OR ACIDIZE REPAIR WELL

(Other)

ABANDON\* CHANGE PLANS

SHOOTING OR ACIDIZING (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

SUBSEQUENT REPORT OF :

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.) •

WELL Status: TA

DATE SI DETA: 1-64 SI, TA JUNE 1969

REASON: Uneconomical to produce.

Plans: leview for reconglishing possi the Devikand Gas Pool.

Projected Date: Because of bubbeting the 4th quarter OK1976.

This approval of temporary abandonment expires

18. I hereby certify that the forgering is true and correct	
	ADMINISTRATIVE ASSISTANT DATE NOV 2 0 1975
	DAIL TOT O
(This space for Federal or State office use)	TOR RECORD

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

\*See Instructions on Reverse Siste GEOLOGICAL SURVE

014. USG-S-H

1- DW