UNITED STATES SUBMIT IN TRIPITATES DEPARTME... OF THE INTERIOR (Other Instruction re-

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

| GEOLOGICAL SU | RVFY |
|---------------|------|

| | LC-030132 (A) | | | | |
|--|-----------------------------------|---|---|--|--|
| | OTICES AND REPOR | RTS ON WELLS plug back to a different reservoir. such proposals.) | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | | |
| 1. OIL ST GAS | | * *********************************** | 7. UNIT AGREDMENT NAME | | |
| WELL WELL OTHER | | | 8. FARM OR LEASE NAME | | |
| 2. NAME OF OPERATOR | | | 7. | | |
| Cities Service Oil Company 3. ADDRESS OF OPERATOR | | | Closson / | | |
| | | | ₩ 72 | | |
| c/o Hobbs Pipe & S 4. LOCATION OF WELL (Report location | upply Co. P O | Box 2010 Hobbs, N | 10. FIELD AND POOL, OR WILDCAT | | |
| See also space 17 below.) | | | | | |
| At surface | | | South Eunice 11. SEC., T., E., M., OR BLK. AND | | |
| H 1980' FNL & 360' | FEL | | SURVEY OR ARMA | | |
| | | | 18-22S-33E | | |
| 14. PERMIT NO. | 15. ELEVATIONS (Show whe | ether DF. RT. GR. etc.) | 12. COUNTY OR PARISH 13. STATE | | |
| | | | Too Now Yorki | | |
| | 3582 | | Lea New Mexi | | |
| 16. Check | Appropriate Box To Indic | cate Nature of Notice, Report, o | or Other Data | | |
| NOTICE OF IN | TENTION TO: | SUB | SEQUENT REPORT OF: | | |
| | PULL OR ALTER CASING | WATER SHUT-OFF | REPAIRING WELL | | |
| TEST WATER SHUT-OFF | MULTIPLE COMPLETE | FRACTURE TREATMENT | ALTERING CASING | | |
| FRACTURE TREAT | ABANDON* | SHOOTING OR ACIDIZING | ABANDON MENT® | | |
| REPAIR WELL | CHANGE PLANS | (Other) | | | |
| (Other) | CHANGE FURNS | (NOTE: Report re | sults of multiple completion on Well ompletion Report and Log form.) | | |
| • | OPERATIONS (Clearly state all E | | | | |
| proposed work. If well is dire nent to this work.) | ctionally drilled, give subsurfa- | ce locations and measured and true ve | ates, including estimated date of starting any ertical depths for all markers and zones perti- | | |
| | | | | | |
| 1. Spotted a 35 sx. | cement plug at | t 3805°. | ancot. | | |
| Z. Spotted a 25 sx. | cement plug at | t 7" casing stub at | 1890 | | |
| | cement plug at | t 9 5/8" casing stu | b and $12 3/4$ " casing sh | | |
| at 200'. | | | | | |
| 4. Spotted a 10 sx. | | | er. | | |
| 5. Hole was loaded | with mud laden | fluids. | | | |
| | 2 5 A | | | | |
| | PAA 3- | 3-70 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | • | | |

| 1 1 1 | | | | | |
|---|----------------|-------------------|---------------|--------|----------|
| 18. I hereby certify that the foregoing is true and correct | t | | _ | | |
| SIGNED STEMMULL | TITLE | Agent | G. | DATE | <u> </u> |
| (This space for Federal or State office use) | | | | x de | |
| APPROVED BY | TITLE | | | LADATE | |
| CONDITIONS OF APPROVAL, IF ANY: | | The STB | A CONTRACT | | |
| *5 | See Instructio | ns on Reverse/Sid | TRICE CARE | | |