

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPL  
(Other instructions  
verse side)

HOBBS OFFICE O. C. C.

Form approved.  
Budget Bureau No. 42-R1424.

5. LEAD DEPARTMENT AND SERIAL NO.

LC-030132 (a)

## 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 Cities Service Oil Company	8. FARM OR LEASE NAME Closson A
3. ADDRESS OF OPERATOR % Hobbs Pipe & Supply Co., Box 2010, Hobbs, N.M.	9. WELL NO. #6
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  J 1980' from the south line and 1980' from the east.	10. FIELD AND POOL, OR WILDCAT South Eunice
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3601
	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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <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 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.)\*

1. Propose to spot a 25 sack cement plug at 3835'.
2. Propose to spot a 25 sack cement plug at 3200', stub of 5 1/2" and shoe of 8 5/8".
3. Propose to spot a 10 sack cement plug at surface with marker.
4. Hole will be loaded with mud laden fluid.

AMENDMENT: Place additional 25 sack cement plug across  
DV Tool at 1600 feet.

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

SIGNED Arthur R. Brown TITLE Agent DATE 12-16-69

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:APPROVED  
AS AMENDED  
DEC 19 1969

\*See Instructions on Reverse Side

ARTHUR R. BROWN  
DISTRICT ENGINEER