

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY		SUBMIT IN TRIPlicate* (Check instructions on reverse side)	Form approved. Budget Bureau No. 12-21424
HOBBS OFFICE A.C.B.		5. LEASE DESIGNATION AND NUMBER NO. 10 031695	
6. IF INDIAN, ALLOTTEE OR INDIAN LAND		7. UNIT AGREEMENT NAME Warren	
8. FIELD AND POOL, OR WILDCAT Wildcat		9. WELL NO. 29	
10. SEC., T., R., M., OR BLK. AND SURVEY OR AREA S-33, T-20S, R-38E		11. COUNTY OR PARISH, 12. STATE Lea N.Y.	
13. PERMIT NO. 3534 DF		14. ELEVATIONS (Show whether DF, HT, CR, etc.) 3534 DF	

15. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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.)

The subject well was plugged and abandoned using the following procedure:

Pulled retrievable bridge plug @ 3500'. Set cement plugs as follows W/10# mud between plugs.

4075 - 4200 W/15 sx Class C Cement
 3395 - 3540 W/15 sx Class C Cement
 2840 - 3010 W/20 sx Class C Cement

Shot off 5 1/2" casing at 2623' and pulled. Set cement plugs as follows W/10# mud between plugs:

2500 - 2665 W/50 sx Class C Cement
 1875 - 2005 W/50 sx Class C Cement
 1225 - 1475 W/50 sx Class C Cement
 435 - 615 W/50 sx Class C Cement
 450 - 350 CIBP's
 0 - 25 W/10 sx Class C Cement

Cont'd.

UNITED STATES
 DEPARTMENT OF THE INTERIOR
 GEOLOGICAL SURVEY

Form approved.
 Budget Bureau No. 42-110-1.
 U. S. LEASE DESIGNATION AND SERIAL NO.

1. NAME OF WELL AND HUBBS OFFICE O. C. C. 13
 2. DATE OF OPERATION
 3. LOCATION OF WELL (See instructions clearly and in accordance with any State requirements.)
 4. FIELD AND POOL, OR WILDCAT
 5. SEC., T., R., M., OR BLM. AND SURVEY OR AREA
 6. COUNTY OR PARISH 13. STATE
 7. UNIT AGREEMENT NAME
 8. FARM OR LEASE NAME
 9. WELL NO.
 10. FIELD AND POOL, OR WILDCAT
 11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA
 12. COUNTY OR PARISH 13. STATE

14. DATE OF INFORMATION TO:
 15. ELEVATIONS (Show whether DT, AT, CL, etc.)
 16. SUBSEQUENT REPORT OF:
 (Name: Report results of multiple completion on Well Completed or Decompletion Report and Log form.)

17. NAME AND ADDRESS OF WELL OWNER (Clearly state all pertinent details, and give pertinent data, including estimated date of starting any work, including 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 started 1-26-65 and completed 2-3-65. Well found to be plugged and plugged. Drilled plugs at 0 - 15', CHSP @ 350' and 1000' and cement plugs to 2623. Spotted 200 sx salt saturated Class C Cement plug @ 2623 - 2500, filled hole w/14.5% mud. Spotted 75 sx Class A salt saturated cement plug @ 1500'. Tagged top of plug @ 1240'. Spotted 100 sx Class A Cement w/2% OACOL. Top of cement @ 1140'. Shut in. In order to observe status of plugging operations. Well plugged 5-13-65, completed 5-24-65.

Well periodically checked and found to be satisfactorily plugged. Spotted 100 sx Class A Cement w/2% OACOL plug from 1140' - 900'.

Spotted 100 sx Class A Cement w/2% OACOL from 900' to surface. Filled void space w/14.5% mud. Restored location to its original condition and erected a 4" A-1 marker. Work started 1-28-66, completed 1-28-66.

18. I, Assistant District Engr. certify that the above is true and correct.
 19. DATE 2-14-66

APPROVED
 MAR 16 1966
 J. L. GORDON
 ACTING DISTRICT ENGINEER
 *See instructions on Reverse Side