

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-050107(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mary E. Wills "A"

9. WELL NO.

12

10. FIELD AND POOL, OR WILDCAT

Rhodes

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 35-26S-37E

12. COUNTY OR PARISH 13. STATE

Lea

New Mexico

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Injection

2. NAME OF OPERATOR
Koch Industries Inc.

3. ADDRESS OF OPERATOR
P.O. Box 2256, Wichita, Kansas 67201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

30 FSL & 2537' FWL

14. PERMIT NO.

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

2995' KB 2982' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

Well Status **TA**

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other)

Well Status **TA**

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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.)*

Number 12 is an injection unit in the waterflood. At present a study is being made of the waterflood. This particular injection well was shut in at the end of 1975 and now that the study is being made will be held pending the results of the study.

This approval of temporary abandonment expires 1-1-78

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

SIGNED

Shirley McGuire

TITLE Production Clerk

DATE 11-28-77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

DEC 7 1977

ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side