Form W-3A

Date

Type or print only

RAILROAD COMMISSION OF TEXAS Oil and Gas Division Notice of Intention to Plug and Abandon Operators must comply with RRC plugging procedures as outlined on the reverse side.

Rev 1/1/83 (02/00)www-1

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Operator's Name and Address (Exactly as shown on Form P-5,	Organization Report)	3. RRC District No.	4. County of Well Site
		5. API No.	6. Drilling Permit No.
		42-	
	7. Rule 37 Case No.	8. Oil Lease No. or Gas Well ID No.	9. Well No.
2. RRC Operator Number		Gus Well ID 110.	
10. Field Name (Exactly as shown on RRC records) 11. Lease Name			
12. Location • Section No. — Block No Survey — No. — Abstract No. A-			
Section No. ———————————————————————————————————			
13. Type of well 14. Type of completion 15. Total depth			
1. oil 3. disposal 5. other (specify)			
2. gas 4. injection Enter appropriate no. in bo		Multiple	
16. Usable-quality water strata (as determined by Texas Dept. of Water Resources) occur to a depth of to feet: and from to feet			
17. •If there are wells in this area which are producing from or have produced from a shallower zone, state depth of zone • If there are wells into which salt water is being or has been disposed of into a shallower zone, state depth of zone			
18. Casing record (list all casing in well)		f cement determined by	
Drilled Cement hole	· r	nper.	Cement casing recovery
Size Depth (sacks) size		nper. vey Calculated	Dona (f4)
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19. Has notice of intent to plug been filed previously for this well? 20. Plugging proposal (List all bridge and cement plugs.			
Load the hole with at least 9.5 lbs. per gallon mud.)			
Yes Mo. Day Yr.			
21. Record of perforated intervals or open hole		No. of sacks	Depth In feet (top & bottom)
Perforations Open Plugged Pluggi	ng method		
	1.		
	2.		
	3.		
	4. 5.		_
	6.		
	7.		
22. Name and address of cementing company or contractor	8.		
22. Ivanic and address of cementing company of contractor			
	23. Antic	pated plugging date for	r this well is:
			Mo. Day Yr.
			•
Typed or printed name of operator's representative Title of person			
Telephone: Area Code Number Date: Mo. Day Yr. Signature			
RRC District Office Action			
Expiration date/			

District Director

Mo. Day

Yr.