

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or to back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other

2. NAME OF OPERATOR
BASS ENTERPRISES PRODUCTION CO.

3. ADDRESS OF OPERATOR
P.O. BOX 2760 MIDLAND, TX. 79702-2760

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1450' FNL & 1830' FEL UNIT LETTER G.
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: SAME AS ABOVE

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE
NM 06808

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
JAMES RANCH

9. WELL NO.
12

10. FIELD OR WILDCAT NAME
LIVINGSTON RIDGE ATOKA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 21 T22S R30E

12. COUNTY OR PARISH
EDDY

13. STATE
NEW MEXICO

14. API NO.
30-015-22162

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3161.8' GL 3180.3' KB

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

DELETE UNIT FROM LEASE NAME

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED R. C. Southers TITLE SR. PROD. CLERK DATE 12-4-87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: