

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

5. LEASE NM 38464	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME NA	
7. UNIT AGREEMENT NAME NA	
8. FARM OR LEASE NAME Pure Gold "A" Federal	
9. WELL NO. 1	
10. FIELD OR WILDCAT NAME Wildcat West Land Division	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21-23S-31E	
12. COUNTY OR PARISH Eddy	13. STATE New Mexico
14. API NO. 30-015-231-75	
15. ELEVATIONS (SHOW DF, KDB, AND WD)	

RECEIVED

FEB 16 1981

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
Coquina Oil Corporation

3. ADDRESS OF OPERATOR  
P. O. Drawer 2960, Midland, Texas 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 800' FSL & 1980' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

O. C. D.  
ARTESIA OFFICE

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

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) Run 5" Liner <input checked="" type="checkbox"/>	

(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.)\*

12/22/80 Ran 32 jts of 5" 18# N-80 HSFJP Production Liner 1264'

Set liner @ 14,976'. Top of liner @ 13,702'. Cmt'd w/200 sx C1 H w/ 0.1% Halad-9, 0.5% CFR-2. Plug down @ 2:00 p.m 12/22/80. Bumped plug w/2700 psi. Checked float. Held o.k. TOH, TIH, to top of 7-5/8" liner. Circ and WOC 18 hrs. TIH to TOC 13,606'. Drld cmt stringers to liner top, 13,702'. Circ hole. Test liner top to 2000 psi, 30 min. ok. TIH and drld cmt inside 5" liner top. Now drlg.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED B. J. Cozine TITLE Operations Manager DATE February 13, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: