

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

03210

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

George H. Mitchell

3. ADDRESS OF OPERATOR

P.O. Box 963 Kermit, Texas 79745

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 724'/N line & 660'/E 34-26S-29E

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: 5900'

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☒

SHOOT OR ACIDIZE ☒

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON\* ☐

(other) ☐

5. LEASE  
LC 065928 - A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

- -

7. UNIT AGREEMENT NAME

- -

8. FARM OR LEASE NAME

Littlefield B0 Federal

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Brushy Draw Cherry Canyon

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

34-26S-29E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

14. API NO.

- -

15. ELEVATIONS (SHOW DF, KDB, AND WD)

2902' GL

RECEIVED BY

MAR 28 1986

O. C. D.

ARTESIA, OFFICE

(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.)\*

Completed Operations - Well #2 is presently producing from the Brushy Draw at an interval of 4950' to 4998'. Completion report dated 8-7-84.

Now requesting to perforate and treat higher in the structure from approximately 4800' to 4920'. Estimated date of proposed work April 15, 1986.

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

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

SIGNED \_\_\_\_\_ TITLE Owner - Operator DATE 3-18-86

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

*[Signature]*  
*[Signature]*

3-26-86

\*See Instructions on Reverse Side