

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 plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other

2. NAME OF OPERATOR  
T.L.MORRIS

3. ADDRESS OF OPERATOR  
P.O.BOX.1038 KILGORE TEXAS 75662

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
330FNL-990FEL  
AT SURFACE:  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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

N.M.-13322

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
LANA

9. WELL NO.

1

10. FIELD OR WILDCAT NAME  
W.C.

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NENE-SEC-16-T16N-R5W

12. COUNTY OR PARISH  
MC.KINLEY

13. STATE  
N.MEXICO

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6345.GL

(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.)\*

11-9-81 WE HAVE PLUGED WELL WITH 50 FT PLUG IN BOTTOM.

ALSO 50 FT PLUG IN TOP.

MOVE RIG CLEAN UP LOCATION.

APPROVED AS TO PLUGGING OF THE WELL BORE.  
LIABILITY UNDER BOND IS RETAINED UNTIL  
SURFACE RESTORATION IS COMPLETED.

RECEIVED  
NOV 26 1984  
OIL CON. DIV.  
DIST. 3

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

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

SIGNED Jim Pypa TITLE AGENT

DATE 11-11-81

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL IF ANY

APPROVED  
AS AMENDED

OCT 24 1984  
M. MILLENBACH  
AREA MANAGER