

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
Southern Union Expl. Co. of TX
3. ADDRESS OF OPERATOR
1217 Main Street, Dallas, Texas 75202
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: Unit letter J, 1840' FSL & 1840' FEL
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) Start of Re-entry work

SUBSEQUENT REPORT OF:

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

5. LEASE
NM 28733
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
-
- Yarborough Federal

9. WELL NO.
-
- #1

10. FIELD OR WILDCAT NAME
-
- Wildcat Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
-
- Sec 3, T23N, R6W

12. COUNTY OR PARISH
-
- Rio Arriba

13. STATE
-
- New Mexico

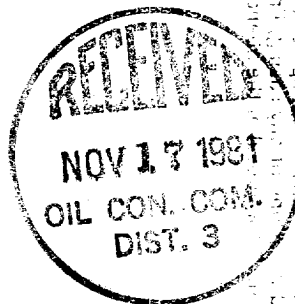
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
-
- 6778' 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.)*

Move in and rig up work-over rig on July 7, 1981. Drilled out top cement plug and began re-entry work.



Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct Drilling &
-
- SIGNED
- Pat M. Harrell
- TITLE
- Production Engineer
- DATE
- November 9, 1981

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NOV 10 1981

NMOCC

FARMINGTON, N.M. 87401

BY smn