

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 ☒ gas ☐ other ☐

2. NAME OF OPERATOR

~~NOEL REYNOLDS~~ *TERRECON OIL Co.*

3. ADDRESS OF OPERATOR

Box 356 FLORA VISTA, N.M. 87415

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

AT SURFACE: *1670SL 2309GL.*

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: *unknown*

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

SF 081160F

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

SAN LUIS FEDERAL

9. WELL NO.

14

10. FIELD OR WILDCAT NAME

San Luis Mesquite

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

21-18N-3W

12. COUNTY OR PARISH

SANDOVAL

13. STATE

N.M.

14. API NO.

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

6663' 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.)*

*will plug in accordance with sundry notice filed and approved Aug. 11, 1982. work to commence within 6 mo.*RECEIVED
MAIL ROOM
SEP 30 PM 1:39
FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICOTHIS APPROVAL EXPIRES **APR 01 1989**

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED

Noel Reynolds

TITLE

operator

DATE

9-30-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

OCT 06 1988

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

APPROVED
JAMES E. EDWARDS
AREA MANAGER
FARMINGTON RESOURCE AREA