

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
NOEL REYNOLDS
3. ADDRESS OF OPERATOR
Box 356, FLORA VISTA, N.M. 87415
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 994' F.N.L. AND 321' F.E.L.
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: 450'
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
S.F. 081171 K
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
S. SAN LUIS
9. WELL NO.
ANN #5
10. FIELD OR WILDCAT NAME
So. San Luis ME
11. SEC., T., R., M., OR BLK. AND SURVEY OR
AREA
33 18N 3W
12. COUNTY OR PARISH
SANDOVAL
13. STATE
N.M.
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6,502' 91.

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

- | | |
|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> |
| (other) | STAT |

STATUS - Temporary Abandon

(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.)*

REQUEST PERMISSION
TO TEMPORARILY ABANDON.

TO BE USED IN WATERFLOOD.

N.M.O.C.C. LISTS THIS WELL AS EK #5.

* Approved subject to well being shut-in at the surface,

This Approval Or Temporary
Abandonment Expires 5-5-82 ⁸³

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Ned Remick TITLE operator DATE 4-23-82

APPROVED BY [Signature] TITLE _____ DATE _____
CONDITIONS OF APPROVAL AND 1002

APPROVED BY
CONDITIONS OF

APPROVED (This space for Federal or State office use)
 APPROVED *[Signature]* TITLE _____
 MAY 15 1982

For JAMES F. SIMS
DISTRICT ENGINEER

AS AMENDED

See Instructions on Reverse Side

NMOCC