

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 Temporarily Abandoned

2. NAME OF OPERATOR
Theron J. Graves

3. ADDRESS OF OPERATOR
PO Box 2077 Farmington, N M 87401

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

AT SURFACE: 1450/N & 790/E Sec 18-T18N-R4W
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

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
NM 6994

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 18-T18N-R4W

12. COUNTY OR PARISH | 13. STATE
Sandoval | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6618 GR.

(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.)*

8/25/76 Ran GR correlation log to 2053'. Hole dry, bottom 7" casing at 1866'. Perforated casing 1704 - 1706; 1682 - 1684 with 2 jets per foot, total 8 holes. No shows. Perforated 1636 - 1638 with 2 jets per foot, total 4 holes and 1422 - 1424 with 4 jets per foot, total 8 holes. Gas TSTM. Set 2 3/8" tubing at 1442'. Swabbed tubing 5 hrs. Water level 1200' below surface. Gas TSTM. Pulled tubing. Well temporarily abandoned.

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

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

SIGNED Theron J. Graves TITLE Operator DATE 3/22/78

(This space for Federal or State office use)

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