**TEST WATER SHUT-OFF** FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING

(other) NAME CHANGE

MULTIPLE COMPLETE **CHANGE ZONES** ABANDON\*

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

Dec. 1973	budget bureau No. 42-K1424
UNITED STATES  DEPARTMENT OF THE INTERIOR	5. LEASE SF081171 K
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	8. FARM OR LEASE NAME
1. oil _ gas _	S. SAN Luis
well well other	9. WELL NO.
2. NAME OF OPERATOR	ANN #15
	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	So San Quan MV
	11. SEC., T., R., M., OR &LK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.)	33 18N 3W
AT SURFACE: 1029 F.N.L. To 1616 F.E.L .	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 570'	SANDOVAL N.M.
	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT. OR OTHER DATA	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	· · · •
SHOOT OP ACIDIZE	<b>\$</b>

(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 NAME CHANGE TROM EKIS TO ANN # 15. ETTECTIVE APRIL 1,1982 REQUEST PERMISSION TO TEMPORARILY ABANDONED. TO BE USED IN WATERFLOOD. \* Approved subject to well being shut in at the surface.

N.M.O.C.C. Lists This WELL AS E.K. # 15
This Approval or Temporary

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

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

space for Federal or State office use) APPROVED BY

TITLE DATE

AS AMENDED

CONDITIONS

JAMES F. SIMS **DISTRICT ENGINEER** 

\*See Instructions on Reverse Side