

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.
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 665' FNL AND 1652' FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH: 550'
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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 checked="" type="checkbox"/> |
| (other)              |                                     |

□ □ □ □ □ □ □ □

RECEIVED (NO

(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 PLUG AND ABANDON THIS WELL,  
BY PUMPING CEMENT FROM T. D. TO SURFACE,  
ERECT DRY HOLE MARKER AND PREPARE WELL SITE  
FOR INSPECTION.

NMOC lists this well as (EK#10

Researched on 10/10/01  
This is incorrect in 1951

\* Location to be rehabilitated when well No. 18 Ann  
Is plugged and abandoned.

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

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

SIGNED 1 ~~Paul Reynolds~~ TITLE Operator DATE 4-26-82

**APPROVED**

This space for Federal or State office use)

APPROVED BY: [Signature] TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_  
CONDITIONS OF APPROVAL: 1002

For JAMES F. SIMS  
DISTRICT ENGINEER

**AS AMENDED**

**See Instructions on Reverse Side**

NMOCC.