

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

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
INTEGRATED ENERGY, INC.

3. ADDRESS OF OPERATOR
P. O. BOX 61585, HOUSTON, TEXAS 77208

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1060' FEL, 1660' FSL ✓
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
N00-C-14-20-5384

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NAVAJO

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
NAVAJO 17-22-7

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
RUSTY CHACRA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 17, T22N, R7W ✓

12. COUNTY OR PARISH
SANDOVAL

13. STATE
NEW MEXICO

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6833' GR

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:

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RECEIVED
MAY 18 1983
U.S. GEOLOGICAL SURVEY
FEDERAL BUREAU OF MINES

(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.)*

Set cast iron bridge plug in 4½" casing at 1500'. Tripped in hole with 2 3/8" tubing. Displaced hole with 9.6#/Galmud. Plugged well as follows with class "B" cement slurry:

Plug No.	Interval	Fest	Sacks Cement
1	1500 - 1450	50	5
2	1218 - 1118	100	10
3	905 - 805	100	10
4	604 - 504	100	10
5	430 - 330	100	10
6	50 - 0	50	5

Tripped down well head. Installed dry hole marker. Cleaned location. Pit will be filled when dry, location restored, & reseeded.

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

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

SIGNED _____ TITLE _____ DATE _____

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: 11-16-83 - NMOC

APPROVED
AS AMENDED

Approved for plugging of the well bore.
Liability under bond is retained until surface restoration is completed.

~~MINUTON COPY~~
Instructions on Reverse Side

NOV 11 1984
John H. Miller
AREA MANAGER