| UNITED STATES | 5. LEASÉ |
|---|--|
| DEPARTMENT OF THE INTERIOR | SF 081160-F |
| 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 Injection Well | San Luis Federal |
| well well other Injection well | 9. WELL NO. |
| 2. NAME OF OPERATOR | 4 16 26 6 6 6 6 |
| TORREON OIL COMPANY | 10. FIELD OR WILDCAT NAME |
| 3. ADDRESS OF OPERATOR | San Luis Mesa Verde |
| 9616 Westpark Dr. Benbrook, TX 76126 | 11. SEC., T., R., M., OR BLK. AND SURVEY OR |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) | AREA 21J 18N 3W |
| AT SURFACE: 2490' from South Line | 12. COUNTY OR PARISH 13, STATE |
| AT TOP PROD. INTERVAL: 2310' from East line | Sandoval NM |
| | 14. API NO. |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | <u> </u> |
| REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WD) |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | 6776 |
| TEST WATER SHUT-OFF | NED INTO BOOK |
| FRACTURE TREAT | |
| SHOOT OR ACIDIZE | |
| PULL OR ALTER CASING | (NOTE: Report results of multiple completion or zone change on Form 9-330.) |
| MULTIPLE COMPLETE | change on rorm 9-330.) |
| 0101110E 201120 () () () () () | MARKET THE STATE OF THE STATE O |
| ABANDON* (other) Start of water injection | |
| (other) Start of water injection | |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is discovered to the complete of | e all pertinent details, and give pertinent dates, |
| measured and true vertical depths for all markers and zones pertinen | it to this work.)* |
| | |
| | |
| Resumed injecting water on 4 | /15/82 |
| | |
| | |

Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct 4/15/82 Manager SIGNED TITLE . DATE (This space for Federal or State office use) APPROVED BY _ TITLE _ __ DATE CONDITIONS OF APPROVAL, IF ANY:

AFR 21 1982

*See Instructions on Reverse Side

