Tubing report

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

PULL OR ALTER CASING

MULTIPLE COMPLETE CHANGE ZONES ABANDON*

(other)

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Dec. 1973	Budget Bureau No. 42-R/1424		
UNITED STATES DEPARTMENT OF THE INTERIOR	5. LEASE NM 19147		
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different	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.) 1. Oil gas syl	8. FARM OR LEASE NAME Huber		
1. OII gas well other 2. NAME OF OPERATOR	9. WELL NO. _{#1}		
Southland Royalty Company	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR	Undesignated Pictured Clif		
P.O. Drawer 570, Farmington, NM	11. SEC., T., R., M., OR BLK. AND SURVEY OR		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Section 31, T23N, R01W		
AT SURFACE: 1775' FNL & 1030' FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Sandoval New Mexico		
AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 7328' GR		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF	2 - 1		

(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.)*

4-8-82 Ran 87 joints, 1-1/4", EUE, 10 round, J55 tubing set in retainer at 2840'.

Subsurface Safety Valve: Manu. an	d Type		Set @	Ft.
18. I hereby certify that the forego	ing is true and correct			
SIGNED A. E. Fully	TITLE District En	ngineer DATE	April 14, 198	2
ACCEPTED FOR RECORD APPROVED BY				
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:		DATE _	To the	
VDD o v	1002			

APR 2 0 1982

See Instrucțions on Reverse Side