

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
T. L. MORRIS

3. ADDRESS OF OPERATOR
P. O. Box 1038, Kilgore, Texas 75662

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 880 FWL 330 FSL
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

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☐
☐
☐
☐
☐

(other) Report of spudding and setting surface casing

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.)*

Spudded well on 30th of May, 1981. Set new 20# 8 5/8 surface casing at 30' circulating 12 sx common cement to surface on May 31, 1981.

5. LEASE

NM 13779

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Cheryl Lynn

9. WELL NO.

#1

10. FIELD OR WILDCAT NAME

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW 1 SW 2 Section 22

T16N R4W

12. COUNTY OR PARISH 13. STATE

Sandoval

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6310 GR

RECEIVED
JUN 13 1981
U.S. GEOLOGICAL SURVEY
FARMINGTON DISTRICT

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

RECEIVED

JUN 17 1981

OIL CON. COM.
DIST. 3

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

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

SIGNED

Thomas D. Allen

TITLE

Agent

DATE

June 13, 1981

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

JUN 17 1981

Dean Elliott