

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
Robert L. Bayless

3. ADDRESS OF OPERATOR
P.O. Box 1541, Farmington, NM 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1850' FNL & 1660' FWL
AT TOP PROD. INTERVAL: same
AT TOTAL DEPTH: same

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* ☐ Install tubing (other)

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

RECEIVED
MAR 17 1983
U. S. GEOLOGICAL SURVEY
CARNEGIE MUSEUM

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

5. LEASE
Contract 45

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
AXI P

9. WELL NO.
5

10. FIELD OR WILDCAT NAME
Ballard Pic. Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 20, T23N, R4W

12. COUNTY OR PARISH
Sandoval

13. STATE
N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
701' RKB, 7001' GL

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.)*

03-12-83 Rig up Bayless Rig #4. Blowdown well, nipple down wellhead assembly. Tripped in hole with 3/4", 1.2#/ft., J-55, 10rd, EUE tubing and landed as follows:

Description	Length	Depth
KB to landing point	8.00	0-8
1 jt. 1-1/4", 2.4#/ft. tbg.	32.12	8-40
1 ea. 1-1/4"x3/4" changeover	.50	40-41
82 jts. 3/4", 1.2#/ft. tbg.	2427.34	41-2468
	2467.96	

Nippled up wellhead assembly, released rig.

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

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

SIGNED Kevin H. McEul TITLE Engineer DATE March 16, 1983

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

MAR 18 1983

ENCLOSURE

*See Instructions on Reverse Side

NMOCC