

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
NOEL REYNOLDS
3. ADDRESS OF OPERATOR
Box 356, FLORAVISTA, N.M. 87415
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660 NL - 2030 WL -
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: 605'

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

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐	☐
FRACTURE TREAT ☐	☐
SHOOT OR ACIDIZE ☐	☐
REPAIR WELL ☐	☐
PULL OR ALTER CASING ☐	☐
MULTIPLE COMPLETE ☐	☐
CHANGE ZONES ☐	☐
ABANDON* ☐	☐

(other) Spud and Casing Report

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 12-8-87. Completed 12-10-87. Ran 33.8' of 1in casing
Twenty three pounds. Circulated Cement to surface -
Ran 604' of 4 1/2" casing 9.50 lb - 25 sacks cement in
6 1/4" hole. Perforated 490 to 505 - 19 shots -
515 to 521 - 6 shots -
547 to 556 - 11 shots.
Waiting on Completion Rig. Plan to commence completion 30 days.

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

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

SIGNED Noel Reynolds TITLE operator DATE 9-30-88APPROVED BY [Signature] (This space for Federal or State office use)
CONDITIONS OF APPROVAL, IF ANY: _____
AREA MANAGER
RIO PUERCO RESOURCE AREA

OCT 06 1988

5. LEASE

SF82-081171K

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

South San Luis

9. WELL NO.

Ann 19

10. FIELD OR WILDCAT NAME

S. San Luis Mesquite

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

33-18N-3W

12. COUNTY OR PARISH 13. STATE

SANDOVALN.M.

14. API NO.

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

6,459 g1

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

REMOVED
OCT 11 1988
OIL COM
DNT