

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form Approved  
Budget Bureau No. 42-R1424

**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 FLORA VISTA, N.M. 87415

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1810 SL 1620 EL

AT TOP PROD. INTERVAL: 595'

AT TOTAL DEPTH: 625'

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\* ☐

(other) SPMD AND CASING REPORT

SUBSEQUENT REPORT OF:

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

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(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.)\*

Spud date 12-11-87. TD reached 12-17-87. Set 30.6" of 7" casing - Circulated Cement. Drilled to 625'.

Ran 625' 2 7/8" casing with slotted liner and Cement Basket 31' off bottom. well not completed. Plan to complete well within next 60 days.

Subsurface Safety Valve: Manul. and Type

Set @ \_\_\_\_\_ Ft.

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

SIGNED Noel Reynolds TITLE operator DATE 9-30-88

(This space for Federal or State office use)

APPROVED BY Noel Reynolds TITLE operator DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY

ACCEPTED FOR RECORD

OCT 05 1988

WFOG

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY \_\_\_\_\_