UNITED STATES ADTMENT OF THE INTEDIOD

	-
5. LEASE	
S.F. 081171K	-
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	-
7. ONIT AGREEMENT NAME	
8. FARM OR LEASE NAME	-
Ann # 10	_
9. WELL NO.	
10 FIG. D. OD WILL DOAT NAME	
10. FIELD OR WILDCAT NAME	ı _
South San Luis Mesa Verd	
ARFA	
Secondary Secondary	
12. COUNTY OR PARISH 13. STATE	
Sandoval N.M.	
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD	<u> </u>
6474 GL	',
	-
invole: Report results of multiple completion or zor change on form 9–330.)	ıe
EP 2 6 1983	
LF & 0 1303	
F LAND MANAGEMENT FON RESOURCE AREA	
ate all pertinent details, and give pertinent date directionally drilled, give subsurface locations an	s, id
ent to this work.)*	
(200) lb =	
ent to surface (200)lbs	
cleaned location	

DEPARTMENT OF THE INTERIOR	S.F. <u>0811/1K</u>	
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 reservoir. Use Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME	
reservoir. Use Form 9-331-C for Such proposals.)	8. FARM OR LEASE NAME Ann # 10	
1. oil gas other other	9. WELL NO.	
2. NAME OF OPERATOR Noel Reynolds	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR	South San Luis Mesa Verde	
Box 356 Flora Vista, N.M. 87415	11. SEC., T., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	S ^{AREA} 33 T18N R3W	
below.) 66 5 'FNL , 1 652 FEL at surface: at top prod. Interval:	12. COUNTY OR PARISH 13. STATE Sandoval N.M.	
AT TOTAL DEPTH: 550	14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6474' GL	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF		
FRACTURE TREAT		
SHOOT OR ACIDIZE	MODE: Rends results of multiple completion or zone	
TOLL ON METER ONOMA	INOTE: Report results of multiple completion or zone change on Form 9–330.)	
MULTIPLE COMPLETE	P 2 6 1983	
ARANDON*	LAND MANAGEMENT	
/- 4b-an	ON RESOURCE AREA	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertinent	irectionally drilled, give subsurface locations and	
Ran 416' l_2^{1} ' tubing circulated cemen	nt to surface (200)1bs	
used 9sx. erected dry hole marker,		
ready for inspection.		
-		
Work completed 6/25/83		
Subsurface Safety Valve: Manu. and Type	set @Ft.	
18. I hereby certify that the foregoing is true and correct		
SIGNED TITLE DATE		
(This space for Federal or State office use)		
APPROVED BY TITLE TITLE		
	APPROVED	

*See Instructions on Reverse Side

NMOCO