

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
Cotton Petroleum Corporation

3. ADDRESS OF OPERATOR
717 17th Street, Suite 2200, Den, CO 80202

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE 820' FEL & 1600' FSL, Sec 24
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	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other) Spud & set su	

SUBSEQUENT REPORT OF:

□ □ □ □ □ □ □ □

FEB 2 1964
U. S. GEOLOGICAL SURVEY
WASHINGTON, D. C.

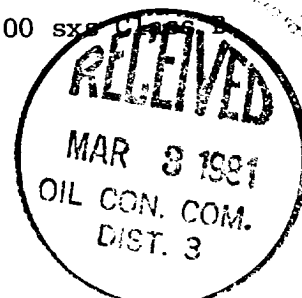
(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE Contract #129	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Apache	
9. WELL NO. #27	
10. FIELD OR WILDCAT NAME So. Blanco PC & Chacra	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 24, T24N-R4W	
12. COUNTY OR PARISH Rio Arriba	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 6924 GR	

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.)*

The subject well was spudded on 12-29-80, with Coleman Rig #3. Surface casing, 8-5/8". 24#, K55, ST&C, was set @ 375' KB. Bottom Hole Deviation 1° @ 375',

The casing was cemented by circulating to surface with 300 sacks of 3% CaCl cement.



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

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

SIGNED D.E. Wood / DMJ TITLE Division Prod Mgr DATE February 24, 1981

(This space for Federal or State office use)

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

FEB 27 1951

BY BLW FARMINGTON DISTRICT

***See Instructions on Reverse Side**

NMCC