## UNITED STATES

5. L	EASE	•
NM	5459	

DEPARTMENT OF THE INTERIOR	NM 5459
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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. # L fr 2 12 17 1
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas well well other	Grynburg Federal
Well Well Other	9. WELL NO. 1943 % & 5.49
2. NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
Southern Union Exploration Company	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR Suite 1800, First	11. SEC., T., R., M., OR BLK. AND SURVEY OR
International Bldg., Dallas, Tex. 75270 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec. 18, T25N, R13W
below.)	NMPM 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
AT SURFACE: 1650 FNL, 1650 FWL, Sec. 18,	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: T25N, R13W	San Juan Thail RNM 15
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-045-22953
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
OUDOFOUENT DEPORT OF	6421 GR - 9 8888
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF U U FRACTURE TREAT	(2) 14년 - 15년 (2) 1년 (
SHOOT OR ACIDIZE	그를 질심하는 봤는 사람이 싶
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
MULTIPLE COMPLETE	그 그 그 그 그 그 그는 한 그를 불렀다. 음 그
ABANDON*	
(other)	그 그는 경우 한불숙취 모두 회원은 참으로 다
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is demeasured and true vertical depths for all markers and zones pertiner 5-8-78 P.B.T.D. 1354'. Ran 1½" tubing at Dumped 55 gal. kerosene in hole.	nd blew well dry with air. Ran correlation log and
perforated intervals 1324-28 wit	h 2 jet shots per foot.
No pressure.	
5-9-78 Perforated interval 1316-20 with	2 jets shots per root.
No blow. Shut well in for 1 hou	
Ran l¼" tubing, waiting on swab	unit.
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
. 4	
18. I hereby certify that the foregoing is true and correct K&A Inc, M	inerals Management
SIGNED TITLE Area Manag	er DATE 6-19-78
Sidned	
(This space for Federal or State of	tice use)
APPROVED BY TITLE	—— DATE RECEIVED
CONDITIONS OF APPROVAL, IF ANY:	