UNITED STATES DEPARTMENT OF THE INTERIOR

UNITED STATES	5. LEASE FREE PROPERTY OF THE STATE OF THE S
DEPARTMENT OF THE INTERIOR	NM - 5459 F F F G G G G /
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OULDDAY HOTIOTO AND DEDOCTO ON MENT	るまする 名 コロゴ 7. UNIT AGREEMENT NAME コロラ
SUNDRY NOTICES AND REPORTS ON WELLS	7. DINT AGREEMENT NAMES COLL
(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 gas 🕝	8. FARM OR LEASE NAME 2 272 Grynburg Federal
well well well other	9. WELL NO. 25 8 2 5 6
2. NAME OF OPERATOR	<u>1 독특성한 중 # [명</u>
Southern Union Exploration Company	10. FIELD OR WILDCAT NAME 고호보 Wildcat 오르워스 프로
3. ADDRESS OF OPERATOR Suite 1800, First	1
International Bldg., Dallas, Tx. 75207 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18, T25N - R13W
below.) Sec. 18, T25N, R13W	NMPM 5 5 2 1 9 1 5 5 1
AT SURFACE: 1650 FNL, 1650 FWL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	San Juan 9. 3 New Mexico
	14. API NO. 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
Meroni, on onize onix	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6 70 8 E 72 2 4
TEST WATER SHUT-OFF []	thoger be disclosed by a surply be be blue be blue bronner. The bronner of the br
FRACTURE TREAT \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	t brown to b
REPAIR WELL	(NOTE: Bonest results of multiple permitted
PULL OR ALTER CASING [] MULTIPLE COMPLETE [] []	change on Form 9–330.)— 17. 2.20 change on Form 9–330.)— 17. 2.20 change on Form 9–330.
CHANGE ZONES	
ABANDON*	casilores outrasso in outrasso in outrasso in cama initia outrassori nel resione outrassori nel resione outrassori outras
(other) Continued Operation	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinen	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and it to this work.)*
6-3-78 to 6-4-78 Well would not flow.	
	10 10 10 10 10 10 10 10 10 10 10 10 10 1
6-5-78 Dropped soap sticks and opened casing to agitate. 🗿 🖫 🖔	
C C 70 Chut wall in CD 100 and MDO	
6-6-78 Shut well in - CP 100 psi TPO	
6-15-78 SICP 65, SITP 0. Dropped soap sticks, rocked well 🐺 📜 🗀 🦠	
No flow. Shut in.	
6-17-78 SICP 20, SITP 5. Dropped soap st	icks, rocked well the first of the second
No flow. Shut in.	
Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct & A, Inc. Minerals Management	
SIGNED TITLE Area Manager DATE - 6-21-78	
(This space for Federal or State office use)	
APPROVED BY TITLE	DATE AND THE BEST OF THE PROPERTY OF THE PROPE
CONDITIONS OF APPROVAL, IF ANY:	RECEIVED

*See Instructions on Reverse Side

015 USGS /1-Southorn Union /1-file