

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 ☒ gas ☐  
well well other

2. NAME OF OPERATOR  
Southern Union Exploration

3. ADDRESS OF OPERATOR  
P.O. Box 2179, Farmington, NM 87499

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

AT SURFACE: 990' FNL & 1980' FWL  
AT TOP PROD. INTERVAL: SAME  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☒  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) Change of Casing Program

RECEIVED

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

DEC 30 1983

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

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.)\*

Hole Size	Casing Size	Weight	Depth Set	Cement
12 1/4"	8 5/8"	32.0#	300'	Circ. to surface w/ 250 cuft Class B
7 7/8"	5 1/2"	15.5#	5000'	2 Stage: 250 cuft 50/50 Poz & 550 cuft 65/35 Poz w/ 6% gel

1. Drill 12 1/4" hole to 300' & set 8 5/8" csg. Cement to circulate to surface.
2. Pressure test casing & BOP to 800 psi. Drill 7 7/8" hole to 5000'.
3. Run Induction & Density logs. Set 5 1/2" casing at 5000' if warranted.
4. Run Temperature Survey, Cement Bond Log & perforate Lower Gallup.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED [Signature] TITLE Drilling Supervisor DATE December 28, 1983

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

