

5 - USGS

1 - Flag-Redfern

1 - File

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424

**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 ☒ other2. NAME OF OPERATOR
Flag-Redfern Oil Co.3. ADDRESS OF OPERATOR
P O Box 208, Farmington, NM 87401

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

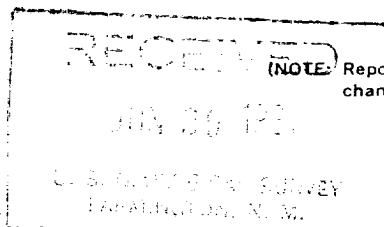
AT SURFACE: 790' FSL - 1850' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

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

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☒


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

5. LEASE

NM 010063

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lucerne

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Undesignated

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 8 T28N R11W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5526' 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.)*

1. Squeezed perfs 586-616' with 15 cu.ft. cement.
2. Cut off surface casing and 2-7/8" tubing 3' below ground.
3. Placed 10 sx cement plug in surface.
4. Cleaned up and restored location.

Work done 3-4-77; Well Completion Log submitted 3-4-77.

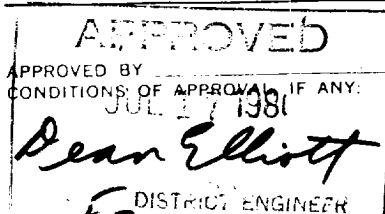
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _____ TITLE Agent DATE 6-26-81

Jim L. Jacobs

(This space for Federal or State office use)



NMOCG

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

JUL 17 1981

BY

