

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  
BETTIS, BOYLE & STOVALL
3. ADDRESS OF OPERATOR  
Box 1193 Hobbs, New Mexico
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 1650' FNL, 1980' FWL, Sec. 35-T20S-R33E  
AT SURFACE:  
AT TOP PROD. INTERVAL: same  
AT TOTAL DEPTH: same

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:

- ☒  
☐  
☐  
☐  
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5. LEASE  
NM - 17237
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Caledon - Federal
9. WELL NO.  
1
10. FIELD OR WILDCAT NAME  
Wildcat
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 35-T20S-R33E
12. COUNTY OR PARISH  
Lea
13. STATE  
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3669' GR

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

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.)\*

8/15/82 6:15 p.m. Spudded well

8/20/82 12:15 a.m. Ran 1591' of new 8 5/8" 24# casing in 12 1/4" hole. Cemented with 500 sx. lite cement followed by 250 sx. Class C Cement. Circulated excess of 175 sx. Plug down at 12:15 a.m. WOC-18 hours

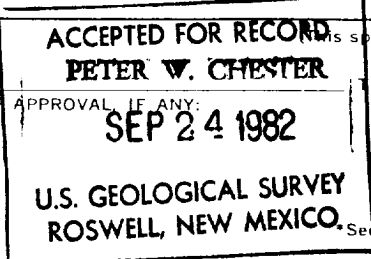
8/20/82 8:00 p.m. Tested after drilling plug. Tested to 700 psi. Held okay.

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

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

SIGNED \_\_\_\_\_ TITLE Supt. DATE 9/8/82

APPROVED BY  
CONDITIONS OF



(This space for Federal or State office use)

TITLE

DATE

See Instructions on Reverse Side