Form Approved. Budget Bureau No 42-R1424

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

| 5. | LEASE    | • |  |
|----|----------|---|--|
|    | NM-12942 |   |  |

| DELANTMENT OF THE INTERIOR  | NIII-1274 Z  |  |  |
|---|--|--|--|
| GEOLOGICAL SURVEY   | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                 |  |  |
| 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.) | 7. UNIT AGREEMENT NAME  WEST MESA UNIT               |  |  |
| 1. oil gas k other  | 8. FARM OR LEASE NAME  WILDCAT  9. WELL NO.          |  |  |
| 2. NAME OF OPERATOR   | FEDERAL 1-24A  |  |  |
| 3. ADDRESS OF OPERATOR ATTN: P.G. GELLING   | 10. FIELD OR WILDCAT NAME WILDCAT                    |  |  |
| P.D. Box 831 HOUSTON, TX 17001 RM. # 6459 WOK  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17   | 11. SEC., T., R., M., OR BLK. AND SURVEY O<br>AREA   |  |  |
| below.)<br>AT SURFACE: 1520 FNL ナ 1000 FEL SEC. 24<br>AT TOP PROD. INTERVAL:  | SEMNEM TIN RIE  12. COUNTY OR PARISH 13. STATE       |  |  |
| AT TOTAL DEPTH:   | BERNALINO NEW MEXICO                                 |  |  |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA   | 15. ELEVATIONS (SHOW DF, KDB, AND WD                 |  |  |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  | 5797' KB   |  |  |
| FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL  RECEIV   | (NOTE: Report results of multiple completion or zone |  |  |
| PULL OR ALTER CASING  MULTIPLE COMPLETE  CHANGE ZONES  ABANDON*  D. S. GEOLOGICAL   | change on Form 9–330.)                               |  |  |
| ABANDON*  (other)  U. S. GEOLOGICAL  FARMINGTON, I  |  |  |  |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state  | a all markingue details and it is a second           |  |  |

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.)\*

REQUEST PERMISSION TO PERFORATE, ACIDIZE, AND POSSIBLY HYDRAULICALLY FRACTURE TREAT BASAL DAKOTA ZONE 19,090'- 19,132' IN SUBJECT WELL.

JUN 21 1982

| ·002                                       |   |                |     |
|--|---|----------------|-----|
| Subsurface Safety Valve: Manu. and Ty      |   | Set @          | Ft  |
| 18. I hereby certify that the foregoing is | s true and correct                      |                |     |
|  | DORF TITLE DIV. PROD. ENG               | . DATE 3-25-82 |     |
| . 😘  | (This space for Federal or State office | e use)         |     |
| APPROVED BY                                | TITLE                                   | DATEAPPROV     | /FD |

CONFIDENTIAL

\*See Instructions on Reverse Side

Eliotte of

NMOCC Santa To DISTRICT ENGINEER

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)

Form Approved

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

| Dec. 1973   | Budget Bureau No. 42-R1424  |
|---|---|
| UNITED STATES  DEPARTMENT OF THE INTERIOR   | 5. LEASE<br>NM-12942  |
| GEOLOGICAL SURVEY   | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME  |
| 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 other  2. NAME OF OPERATOR  Shell Dil Company  3. ADDRESS OF OPERATOR  P.O. Box 831 Houston Tx 77001 Rm. # 6459 WOK  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  AT SURFACE: ISSO FNL + 1000 FEL Sec. 24 | 7. UNIT AGREEMENT NAME  WEST MESA UNIT  8. FARM OR LEASE NAME  WILDCAT  9. WELL NO.  FEDERAL 1-24A  10. FIELD OR WILDCAT NAME  WILDCAT  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  SEMENEY TIN RIE  12. COUNTY OR PARISH 13. STATE |
| AT TOP PROD. INTERVAL: AT TOTAL DEPTH:  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,   | BERNALINO NEW MEXICO  |
| REPORT, OR OTHER DATA   | 15. ELEVATIONS (SHOW DF, KDB, AND WD)<br>579つ KB  |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF  FRACTURE TREAT  SHOOT OR ACIDIZE   | VED   |

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

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.)\*

U. S. GEOLOGICAL SURVEY. FARMINGTON, N. M.

REQUEST PERMISSION TO PERFORATE, ACIDIZE, AND POSSIBLY HYDRAULICALLY FRACTURE TREAT BASAL DAKOTA ZONE 19,090'- 19,132' IN SUBJECT WELL.

| Subsurface Safety Valve: Ma                  | nu. and Type                        |             | Set @   | Ft.               |
|--|-------------------------------------|-------------|---------|-------------------|
| 18. I hereby certify that the                | foregoing is true and correct       |             | -       |                   |
| FIGHTO 11 2 1982 W. F.                       | N. KELLDORF TITLE DIV. PROD. EA     | JG. DATE 3- | 25-82   |                   |
| 212  | (This space for Federal or State of | office use) |         |                   |
| OIL CONTROL BY TO CONDITIONS OF APPROVAL, IF | ANY:                                | DATE        | APPROV  | ĒD_               |
|  | A A A E E E E EA E E E E E          |             | UM 1 74 | 30 <sup>592</sup> |