

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

SUNDRY NOTICES AND REPORTS ON WELLS

SUNDRY NOTICES AND REPORTS ON
(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

NAME OF OPERATOR
Anadarko Production Company

3. ADDRESS OF OPERATOR

ADDRESS OF OPERATOR
P. O. Box 67, Loco Hills, New Mexico 88255

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

AT SURFACE: 1980' FN&ELs Sec. 34,T17S,R30E
AT TOP PROD. INTERVAL: Same

AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

AT TOTAL DEPTH: Same

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

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REQUEST FOR APPROVAL TO: ☐

TEST WATER SHUT-OFF

TEST WATER AND FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON*

(other)

SUBSEQUENT REPORT OF

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

☐ ☐ ☒ X Spud, set & cement surface, int. & pdn. csg.

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.)*
9. 2nd Stage - cemented out DV tool @ 8000' w/375 sx Trinity Lite w/5# Salt/sx, 1/2# Flocele/sx & 6# Gilsomite/sx and tailed-in with 100 sx Class H; final circ press = 1400#; closed tool & circ 6 hrs. Checked for waterflow - had no flow.
- 3rd Stage - cemented out DV tool @ 5517' w/575 sx Trinity Lite w/5# Salt/sx, 1/2# Flocele/sx and tailed-in with 100 sx Class H Neat; final circ press = 1400#; closed upper tool; PD @ 5:15 PM 2-12-82.
10. WOC 19 hours; Bennett Wireline Co. ran Temp. Survey and found cement top @ 3200' (intermediate casing shoe @ 3464') and PBTD @ 5469'.

Note: Appropriate forms will be filed upon completion of well.

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

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

SIGNED

TITLE Area Supervisor

DATE February 25, 1982

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

• See Instructions on Reverse Side