

RECEIVED BY
Form 9-331
Dec. 1973
JUN 01 1984
O. C. D.
ARTESIA, OFFICE

MIN OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

Form Approved.
Budget Bureau No. 42-R1424

C/S/H

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
GRSJ PETROLEUM

3. ADDRESS OF OPERATOR
P.O. BOX 6, LOCO HILLS, NEW MEXICO 88255

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 660' From S line & 660' From W line
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

5. LEASE
LC-058709 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Taylor Unit

8. FARM OR LEASE NAME

9. WELL NO.
5

10. FIELD OR WILDCAT NAME
Shugart(Y.SR.Q.G.)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
12, T.18S, R31E NMPM

12. COUNTY OR PARISH | 13. STATE
Eddy | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input checked="" type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.)*

This well was off when purchased.
Pulled rods & oump, pump was stuck. Rebuilt pump and ran pump and rods, then flushed with 60 barrels fresh water.
Put well back pumping and it is is making approximately 3 barrels per day.

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

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

SIGNED Andrew W. Shall TITLE Co-Owner DATE 5/23/84

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY GW TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

MAY 30 1984

Carlsbad, NEW MEXICO

*See Instructions on Reverse Side

