

C/S/H

RECEIVED BY  
APR 30 1984  
O. C. D.  
ARTESIA, OFFICE  
NO. 1612

Form 9-331  
Dec. 1973

Form 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 well  gas well  other

2. NAME OF OPERATOR  
Santa Fe Energy Company

3. ADDRESS OF OPERATOR  
500 W. Ohio, Midland, Texas

4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 below.)  
AT SURFACE: 1280/W 1290/E  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

5. LEASE  
ARTESIA, OFFICE NO. 1612

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
North East Loving 34 Federal

9. WELL NO.  
1

10. FIELD OR WILDCAT NAME  
Dublin Ranch

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
34, T22S, R28E

12. COUNTY OR PARISH  
Eddy

13. STATE  
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3051.4 GR

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

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 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)	drill new well		

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

RECEIVED  
JAN 24 9 36 AM '84  
BUREAU OF REVENUE  
ROSWELL DISTRICT

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.)\*

- 1-8-84 Spud @ 9 a.m.
- 1-2-84 Ran 20" casing to 417'; 94# K-55. Cmt w/935 sx Class "C" + 27cc, 14.8 slurry weight, 1234 SL volume. 100 sx circulated. WOC.
- 1-3-84 WOC 12 1/2 hours, test casgin. to 600 psi.
- 1-9-84 Set 13-3/8" casing at 2628'; 68# K-55. Cmt w/2300 sx Class "C" (2000 sx Pacesetter lite, 316 salt, 116 hiseal 12.4 slurry weight, 396 slurry volume, 660 sx circulated to surface, WOC.
- 1-10-84 WOC 28 1/2 hours, test BOP 1500 psi.

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

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

SIGNED Billie Hood TITLE Sr. Prod. Clerk DATE 1/12/84

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

APR 27 1984