

## SUNDRY NOTICES AND REPORTS ON WELLS

1. oil well ☒ gas well ☐ other

3. ADDRESS OF OPERATOR

P. O. BOX 1038 Kilgore TX 75662

AT SURFACE: 660 FNL 1980 FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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:

## 5. LEASE

NM 13182

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

**7. UNIT AGREEMENT NAME**

8. FARM OR LEASE NAME

9. WELL NO.

**Tressa #1**

10. FIELD OR WILDCAT NAME

WILDCAT NAME  
Wildcat

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

NENW Sec. 11 T16N R5W

12. COUNTY OR PARISH | 13. STATE

McKinley

3. STATE  
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6307 Gr

(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.)\*

Request permission to drill to the top of the Massive Gallup at 1500'.

Subsurface Safety Valve: Manu. and Type

Set @ \_\_\_\_\_ Ft.

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

**SIGNED**

TITLE Agent

DATE March 10, 1981

(This space for Federal or State office use)

**APPROVED BY:**

**TITLE**

DATE \_\_\_\_\_

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

NMOCC