

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 <input checked="" type="checkbox"/> gas well <input type="checkbox"/> other <input type="checkbox"/>	5. LEASE S.F. 081160 F
2. NAME OF OPERATOR NOEL REYNOLDS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 356 - FLORAVISTA, N.M. 87415	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1862' S.L. 217' E.L. AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 945'	8. FARM OR LEASE NAME SAN LUIS FEDERAL
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	9. WELL NO. 12
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> CHANGE ZONES <input type="checkbox"/> ABANDON <input type="checkbox"/> (other) TEMPORARILY ABANDON	10. FIELD OR WILDCAT NAME San Luis Mesquite
SUBSEQUENT REPORT OF: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 21 18N 3W
	12. COUNTY OR PARISH SANDOVAL
	13. STATE
	14. API NO.
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6685 g/l.

(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.)\*

Due to zero weather and snow have been unable to work on well. Request permission to extend 1-89.

RECEIVED  
JAN 20 1989  
OIL CON. DIV.  
DIST. 3

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

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

SIGNED Noel Reynolds TITLE operator DATE 1-12-89

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

James E. Edwards Jr.  
FARMINGTON, NEW MEXICO