Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0510073 -A

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 "APPLICATION FOR PERMIT—" for such proposals.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1.

OIL WELL ☑   GAS WELL ☑   OTHER

7. UNIT AGREEMENT NAME

San Ysidro Wash Unit

2. NAME OF OPERATOR

CORINNE GRACE

8. FARM OR LEASE NAME

3. ADDRESS OF OPERATOR

Box 1418, Carlsbad, New Mex.

9. WELL NO.

Union Maid No. 1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface 590' 580'

660 FNL, 660 FEL, Sec. 11, T. 21 N., R. 3 W.

10. FIELD AND POOL, OR WILDCAT

wildcat

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

11, 21 N., R. 3 W.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 7245

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mex.

16.   **Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other)	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) x Setting casing, etc.	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
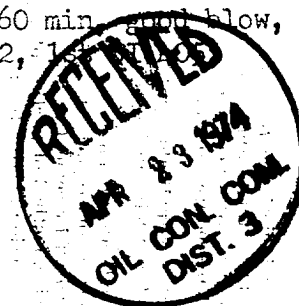
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

4½ casing was set to TD (6880) and cemented by Halliburton. 200 Sks used at bottom and 150 sks in Menefee.

DST #1, tool open 30 Min, Wk Blow throughout, shut in 60 min. open for 90 min. wk blow throughout.Rec. 910 ft. water cut mud. IHH 2056, FHH 2056 1st flow 81-216, 2nd flow,216-513. ISI 1444, Fsi, 1444 Test interval 4187-4437

DST # 2 4445-4519, Open 30 Min, Wk Blwo throughout, shut in 30 Min, open 60 Min Weak blow, died at 60 min, Final shut in 90 min. Rec. 140 ft. oil cut mud. IHH 2106 FHH 2106, 1st flow, 54-54, 1st S.I. 1517, 2nd Flow 82-109, FSI 1490.

DST # 3 6399-6607. Open 30 min. good blow, Shut in 60 min, open 60 min, good blow, shut in 90 min. recovered 60 ft. mud. IHH 3225, 1st flow 102-102, 2nd flow 135-243, 2nd S.I. 859. FHH 3172

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

SIGNED _____   TITLE ___Geologist___   DATE __April 19, 1974__

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 22 1974

*See Instructions on Reverse Side