

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
Noel Reynolds

3. ADDRESS OF OPERATOR

Box 356 Flora Vista N.M. 87415

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 655' FNL, 1662 FEL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: 335'

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

REQUEST FOR APPROVAL TO:

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

SUBSEQUENT REPORT OF:

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☐

(other) Status Temporary Abandon

5. LEASE

SF 081171-K

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

South San Luis Mesa Verde

8. FARM OR LEASE NAME

9. WELL NO. Ann # 18

10. FIELD OR WILDCAT NAME

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 33 T18N, R3W

12. COUNTY OR PARISH
Sandoval

13. STATE
N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6448' GL

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

OIL CON. DIV.
DIST. 3

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 leave this well in it's present status for 1 year, as we believe it will be useful to us in our water flood program.

final extension

This Approval Or Temporary
Abandonment Expires

5-5-84

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 10-10-83

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
AS AMENDED

*See Instructions on Reverse Side

NMOCC

OCT 20 1983
K. Brumham
M. MILLENBACH
AREA MANAGER
M. Brumham