M H CH COND COMMENDIAN	
form 9-331 and the second s	Form Approved. Budget Bureau No. 42–R1424
Dec. 1973-24 Contractions HOBDU, HIPLY MALLINGTEBOSTATES	5. LEASE
DEPARTMENT OF THE INTERIOR	Federal NM 058102
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME Flying M (SA) Unit
(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.)	8. FARM OR LEASE NAME
1. oil gas well well other	Flying M (SA) Unit Tract 1A 9. WELL NO.
2. NAME OF OPERATOR Coastal Oil & Gas Corporation	1 10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Flying M (SA)
P. O. Box 235, Midland, Texas 79702 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
below.) 660 FNL + 1993 FEL	Section 29, T-9-S, R-33-E
AT SURFACE: TAT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Lea New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	_
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 4334 GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
SHOOT OR ACIDIZE	
REPAIR WELL K L	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
ABANDON*	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statistic including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertine	directionally drilled, give subsurface locations and
<ol> <li>Release packer and POOH. Run bit and sc BP). Perforate 4 holes 4354-56'.</li> </ol>	
<ol> <li>Run cement retainer on 2-3/8" tubing (wo casing to 1000 psi.</li> </ol>	rk string) and set at 4250'. Test
<ol> <li>Squeeze perforations with 2000 gallons F</li> <li>POOH and WOC. Drill out to 4400' and ru</li> </ol>	lo-Chek and 100 sx Class "C" cement n Neutron log 4400' to 3700'.
4. Perforate 4354-4390' with 1 SPF. Run an	d set packer at 4285'.
<ol> <li>Treat with 3000 gallons 15% acid and sal exceed 3 BPM or 4000#. Swab load. POOH</li> </ol>	
6. Run Baker AD-1 packer on Salta-lined tub	
injecting water.	
Subsurface Safety Valve: Manu. and Type	Sat @ Ft
18. I hereby certify that the foregoing is true and correct SIGNED Any Mooder TITLE Operations S	September 6, 1984
(This space for Federal or State APPROVED BY	office use) DATE DATE
CONDITIONS OF APPROVAL, IF ANY:	
Subject to Like Approval See Instructions on Revers	e Side
Like Approval "See Instructions on Revers	

...

.