

N. M. OIL CONS. COMMISSION
P. O. BOX 1980
ROSBURG, NEW MEXICO 88240

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

Chama Petroleum Company

3. ADDRESS OF OPERATOR

P.O. Box 31405, Dallas, Texas 75231

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

AT SURFACE: 2180' FSL & 660' FEL Sec. 1

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

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

(other) Recomplete

5. LEASE

NM-4312

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Pennzoil Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME Undesignated
North Quail Ridge (Morrow)

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

Sec. 1, 19S, 33E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

14. API NO.

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

3776.0' GL

(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.)*

8-12-83: 330# tubing pressure, opened up to pit, flowed small amount of water & distillate, turned well thru Conoco's low pressure system.

8-13-83: TP 30, rate 23, -0- bbls. oil, -0- bbls. water, wide open choke

8-14-83: TP 30, rate 23, -0- bbls. oil, -0- bbls. water, wide open choke

8-15-83: TP 30, rate 11, -0- bbls. oil, -0- bbls. water, wide open choke

Subsurface Safety Valve: Manu. and Type

Set @

Ft.

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

SIGNED

Kathie Craft

TITLE

Prod. Secretary

DATE

August 15, 1983

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

ACCEPTED FOR RECORD

CONDITIONS OF APPROVAL, IF ANY:

AUG 31 1983

*See Instructions on Reverse Side

ROSWELL, NEW MEXICO

