- NM Oil Cons. Drawer DD	Commission		_ c 5F
Form 9-331 Artesia, NM	8821 0	Form Approved. Budget Bureau No. 42–R1424	
UNITED STATES	5. LEASE		
DEPARTMENT OF THE INTERIORRECI GEOLOGICAL SURVEY		1 N, ALLOTTEE OR TRIBE NAME	
SUNDRY NOTICES AND REPORTS ON	a different	GREEMENT NAME	
	Dialar.	R LEASE NAME	
1. oil gas well well well ARTESL	9. WELL N	ore Federal 10.	
2. NAME OF OPERATOR		DR WILDCAT NAME OF AST	
Alpha Twenty-One Production Company		ecos Slope Bitter Lakes	; WC
P.O.Box 1206 Jal, New Mexico 88252	11. SEC., T	., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See below.)	space 17 AREA	9s 26e	
AT SURFACE: 660 FNL FWL		Y OR PARISH 13. STATE	
AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same	Chaves		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF		5 60586	
REPORT, OR OTHER DATA		TIONS (SHOW DF, KDB, AND WD)	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPO	RT OF: 3744 GI	<u>3757 KB</u>	
TEST WATER SHUT-OFF	والمعاد ومتعادي والمتعادين والمتعادين		
FRACTURE TREAT		•.	
		port results of multiple completion or zone ange on Form 9–330.)	
PULL OR ALTER CASING	4		
	007221		
ABANDON* L KK (other) Downhole commingle the Abo			
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (including estimated date of starting any proposed work measured and true vertical depths for all markers and zo	If well is directionally d	rilled, give subsurface locations and	
10-15-87 Rig up a pulling u the packer from th	nit, kill the we	ll, and pull	
to 5322 ft. Start	swabbing the loa	d back.	
10-16-87 Resume swabbing. S kicked the well of it up.	wab a total of 4 f. Flowed to a t	4 bbls. and ank to clean	• • •
DHC No. 663			
Subsurface Safety Valve: Manu. and Type		Set @ F1	
18. I hereby certify that the foregoing is true and correct			ina ana an
	action Supt. DATE	10-20-87	_
Mike Copeland	ral or State office use)	And the second	10
APPROVED BY TITLE		TE MICEPID FOR THE	– JEK
CONDITIONS OF APPROVAL, IF ANY:			-1 4
		NOV 9 138	
			NAGEMENT
*See Instructio	ns on Reverse Side	BUREAU OF LAND MA ROSWELL RESOLR	CE AREA

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