

UNITED STATES OF AMERICA
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NM OIL COM. COMMISSION

Drawer DL

Approved
Budget Bureau No. 42-81424

Artesia, NM 88210

NM 036718

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a reservoir. Use Form 5-331-C for such proposals.)

1. oil well ☐ gas well ☒ other ☐

2. NAME OF OPERATOR
Mountain States Petro. Corp.

3. ADDRESS OF OPERATOR
P O Box 1936 Roswell, New Mexico 88201

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

AT SURFACE: 958' FSL & FEL

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:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☐

SUBSEQUENT REPORT OF:

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8. FARM OR LEASE NAME
Brotar

9. WELL NO. # 2

10. FIELD OR WILDCAT NAME
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
20-15S-28E

12. COUNTY OR PARISH
Chaves

13. STATE
New Mexico

14. API NO.
30-005-60419

15. ELEVATIONS (SHOW DF, KDB, AND WD)
GR 3610

(NOTE: Report results of multiple completion or zone changes on Form 5-330.)

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.)*

7-16-85 Notified BLM of date & time for plugging well.

7-17-85 Plugged with 300 sx class c cement from TD 1820' to 1600'. Pumped in heavy mud. Spotted plug 650' to 750'. Tag plug. Pumped in heavy mud. Spotted plug 150' to 250'. Pumped in heavy mud. 50 ft. surface plug with dry marker. (5 1/2" csg.) Spotted plug 8-5/8" casing from 150' to 250'. 50 ft. to surface. Filled pits, removed all debris, leveled and cleaned location.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED

Roger Slayton

TITLE

Agent

DATE

07-19-85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

PETER W. CHESTER

JUL 31 1987

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side

Post IO-2
8-23-85
P+H