

RECEIVED

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 ☐ gas ☐ other ☒ Injection

2. NAME OF OPERATOR

Kersey & Company

3. ADDRESS OF OPERATOR

P.O. Box 316, Artesia, NM 88211-0316

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

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

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) ☐

5. LEASE

~~Welch Reid #1~~ LC-065729

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

RLPSU Flood

8. FARM OR LEASE NAME

RLPSU - Tract 12

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Red Lake-Q-G-SA

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

2310 N, 1650 E, Sec. 20-17S-R28e

12. COUNTY OR PARISH 13. STATE

Eddy

NM

14. API NO.

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

(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.)*

1. Dump at least 300' cement from 1935-1635' to isolate the open hole. (TAG)
2. Estimated TOC 750', perforate at 750', set cement retainer at 725' and attempt to squeeze annulus to bring cement back to surface casing - but preferably to surface.
3. Sting out of retainer and leave 35' of cement on retainer.
4. Spot 100' of cement, 50' above and 50' below 8 5/8" casing shoe. (TAG)
5. Leave 50' surface plug, erect P&A marker.
6. Restore surface.

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

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

SIGNED Harold Kersey TITLE Co-Owner DATE 9-24-87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 10-7-87

CONDITIONS OF APPROVAL, IF ANY: