

C/SF

UN. STATES COMMISSION  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

88210

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:

RECEIVED BY  
AUG 13 1987  
C. D.  
ARTESIA OFFICE

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

- | REQUEST FOR APPROVAL TO:                      | SUBSEQUENT REPORT OF:    |
|---|--------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/>  | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/>       | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>     | <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/>          | <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/>    | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/>         | <input type="checkbox"/> |
| ABANDON* <input checked="" type="checkbox"/>  | <input type="checkbox"/> |
| (other) <input type="checkbox"/>              | <input type="checkbox"/> |

(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. Spot 100' plug 1835-1935'
2. Perforate 7" @ 1250
3. Spot 100' plug in and out of 7"
4. Perforate 7" @ 300-500'
5. 100' plug in and out of 7" [TAG]
6. Surface plug and marker → 50' surface plug.
7. NOTE: 7" casing cemented with 100 sacks cement
8. Run minimum of 9.0 ppg salt gel between all plugs.

JUL 22 10 57 AM '87  
CARLSBAD RESOURCE  
AREA HEADQUARTERS

RECEIVED

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Naved Kersey TITLE Co-Owner DATE 7-17-87

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 8-11-87  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

Subject to  
Like Approval  
by State