

clsf

APR 27 1987
O. C. D.
ARTESIA OFFICE
UNITED STATES

OIL CONS. COMMISSION
33210

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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 ☒ Injection Well

2. NAME OF OPERATOR
J. Cleo Thompson

3. ADDRESS OF OPERATOR
P.O. Box 6445 Odessa, Texas 79767

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL 1980' FEL of Sec. 33
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 <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 type="checkbox"/>	<input checked="" type="checkbox"/>
(other) _____	Plug & Abandon

5. LEASE
L.C. 060325

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
West square Lake unit

8. FARM OR LEASE NAME
Tract 9

9. WELL NO.
3

10. FIELD OR WILDCAT NAME
Square Lake

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 33 T16S R30E

12. COUNTY OR PARISH
EDDY

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3724' G.L.

(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) C.I.B.P. @ 2730' w/35' cmt. on top.
- (2) Perf @ 2225' set CR @ 2160' could not break Queens & Seven rivers formation down, Pump 30sx cmt. on top of C.R. TOP of cmt. @ 1970.
- (3) Perf @ 1200' set C.R. @ 1154' pump 25 sx. cmt. TOP of cmt. @ 1023' 131' on top of C.R.
- (4) Perf @ 450' pump 125 sx. cmt. Circulated to surface left 5 1/2 csg. full.
- (5) Cut csg. below surface and set surface marker.

Witnessed by Johnny Robinson (State oil Commission)

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

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

SIGNED Amadeo P. P. TITLE Production Foreman DATE 5-14-86

(This space for FEDERAL office use)

APPROVED BY Orig. Sgd. David L. Mari TITLE CARLOSAD RESOURCE AREA DATE 4-24-87

CONDITIONS OF APPROVAL, IF ANY:

Post ID-2
5-8-87
PLA