

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 ☐ well gas ☐ well other ☐

2. NAME OF OPERATOR

J. Cleo Thompson

3. ADDRESS OF OPERATOR

P.O. box 1277 Odessa, Texas 79768-2579 D.

4. LOCATION OF WELL (REPORT LOCATION CLEARLY below.)

AT SURFACE: 1980 fnl 660 fel

AT TOP PROD. INTERVAL: Grbg sanandres 2938'

AT TOTAL DEPTH: 3160'

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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☐

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5. LEASE 058179

LC. 029431 NM 02427

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Square Lake

8. FARM OR LEASE NAME

Tract 14

9. WELL NO.

10. FIELD OR WILDCAT NAME Square Lake

West Square Lake unit

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

Sec. 34 T16s R30e

12. COUNTY OR PARISH

EDDY

13. STATE

NM

14. API NO.

00-015-03985

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

3771' GL. DF

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

* GAVE VERBAL PER discussion
w/Amador Pando

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. a. T.d. @ 2620' Unable to go any deeper.

b. We propose to spot cmt. @ 2620' up to 2350'. (50 sx5) (TAG)

2. Perf. @ 2300' pump 50 sx cmt. into perfs and leave 200' of cmt. on top of perfs. (Queens and seven rivers)

3. Perf. @ 1290' pump 50 sx cmt. into perfs and leave 100' on top of perfs. (50' below base of salt)

4. Perf @ 500' circulate cmt. to surface on inside and outside of casing. [15 sx5]

5. Cut casing 3' below surface level set surface marker and rehabilitate [surface plug]

establish circ. behind 10" csg: see if cement will then equalize with 7"-10" annulus.

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

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

SIGNED

Amador Pando Jr.

TITLE

Production Manager

DATE

5-7-87

APPROVED BY

Amador Pando Jr.

TITLE

Production Manager

DATE

5-7-87

CONDITIONS OF APPROVAL, IF ANY: