

cf

RECEIVED BY

FEB 6 1985

Form 9-331

Dec. 1973

O. C. D.

ARTESIA, OFFICE

NM OIL CONS. COMMISSION

Drawer DD

Artesia, NM 88210

Form Approved.

Budget Bureau No. 42-R1424

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

Mobil Producing TX & NM, Inc. ✓

3. ADDRESS OF OPERATOR

9 Greenway Plaza, Ste. 2700, Houston, TX 77046

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

AT SURFACE: 2310' FSL & 1980' FEL

AT TOP PROD. INTERVAL: Same as surface

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) \*TEMPORARILY ABANDON ☐

5. LEASE

NM 04421

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

N.E. Square Lake Premier Unit

8. FARM OR LEASE NAME

9. WELL NO.

26

10. FIELD OR WILDCAT NAME

Square Lake G-SA, North

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

Sec. 10, T16S, R31E

12. COUNTY OR PARISH

Eddy

13. STATE

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.)\*

This well was temporarily abandoned 6/1/83; uneconomical to produce. Request permission to hold in TA'd status for an additional year.

APPROVED FOR 12 MONTH PERIOD

ENDING

2/1/86  
upon the completion of a satisfactory well test.

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

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

SIGNED Virginia Howard TITLE Authorized Agent DATE 11/28/84

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: