heaver Do Actesia, III 13210

Form 9-331

Form Approved.

Dec. 1973	* Budget Bureau No. 42R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	LC 064637A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WEL	T. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a d reservoir. Use Form 9–331–C for such proposals.)	ifferent HENSHAW DEEP UNIT
reservoir. Use Form 9–331–C for Such proposals.)	
1. oil gas other	HENSHAW DEEP UNIT 9. WELL NO.
	14
2. NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
SHELL OIL COMPANY 3. ADDRESS OF OPERATOR	HENSHAW WOLFCAMP
P. O. BOX 991, HOUSTON, TX 77001	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See spa	
helow)	SEC. 24, T-16-S, R-30-E
AT SURFACE: UNIT LETTER M, 660' FSL & 660'	FWL 12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: SAME	EDDY NM
AT TOTAL DEPTH: SAME	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NO	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT (3837 DF
TEST WATER SHUT-OFF	
FRACTURE TREAT	CEIVED BY
SHOOT OR ACIDIZE	i .
REPAIR WELL PULL OR ALTER CASING SE	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
MULTIPLE COMPLETE	
CHANGE ZONES	O. C. D.
ABANDON* (other) INSTALL ARTIFICIAL LIFT A	RTESIA, OFFICE
(other) INSTALL ARTITICIAL EITT	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clea including estimated date of starting any proposed work. If we measured and true vertical depths for all markers and zones	vell is directionally drilled, give subsurface locations and
11-25-81: Spotted 250 gals 15% inhibite	d acid 0 8711'.
12-02 to 12-03-81: Install artificial li	ft equipment
12 02 to 12 00 or. Install dictificial if	To equipment.
12-08-81: Started well pumping to batte	ry. Well returned to production.
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Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foliagoing is true and correct	en e
SIGNED WITH SUPV. RE	
PETER W. CHESTE his space for Federal or	State office use)
	DATE
APPROVED BY SEP 29 1983 TIPLE CONDITIONS OF APPROVAL, IF ANY:	DATE
	FEB 1 8 1988