Form 9–331
Dec. 1973

Form Approved.
Budget Bureau No. 42–R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

C/ OF

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 [X]   gas well [ ]   other

2. NAME OF OPERATOR
John H. Trigg

3. ADDRESS OF OPERATOR
Box 520, Roswell, N.M. 88202

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1650' FSL & 990' FEL
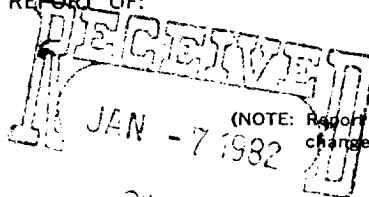AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

5. LEASE
NM-05855

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
RECEIVED

7. UNIT AGREEMENT NAME
JAN 1 2 1982

8. FARM OR LEASE NAME
Government

9. WELL NO.
5

10. FIELD OR WILDCAT NAME
Undesignated East Red Lake Q-G

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 25-T16S-R28E

12. COUNTY OR PARISH   13. STATE
Eddy   N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3711.8' G.L.

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)			

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JAN - 7 1982
OIL & GAS
U.S. GEOLOGICAL SURVEY
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(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.)*

12/12/81:   Drilled to a T.D. of 328'. Ran 324' of new 8-5/8" 24 lb. casing. Cemented with 100 sx Class "C", 2% CaCl.

12/14/81:   Drilled to a T.D. of 400'. Squeeze surface pipe. Cemented with 100 sx Class "C", 2% CaCl. Tested 30 min. No fluid.

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

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

SIGNED _Mark McClellan_   TITLE _Operators-Agent_   DATE _1/5/82_

ACCEPTED FOR RECORD
ROGER A. CHAPMAN

APPROVED BY _____   (This space for Federal or State office use)
CONDITIONS OF APPROVAL, IF ANY:
JAN 1 1 1981

TITLE _____   DATE _____

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*See Instructions on Reverse Side