

NM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

Form 9-331
Dec. 1973

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 ☐ well
2. NAME OF OPERATOR
C.E. LaRue & B.N. Muncy, Jr.
3. ADDRESS OF OPERATOR
PO Box 196 Artesia, NM 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 990' FSL & 660' FEL Section 23, T16S, AT SURFACE: R31E
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
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:
☒ RECEIVED

OCT 12 1982

O. C. D.
ARTESIA, OFFICE

5. LEASE
NM 16820
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Amoco Federal
9. WELL NO.
#1
10. FIELD OR WILDCAT NAME
Bunker Hill (Penrose)
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 23, T16S, R31E
12. COUNTY OR PARISH 13. STATE
Eddy NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
4383.6' EL

(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.)*

Set 1271' of 24# API 8 5/8" Casing, Cemented with 300 sacks of Class C w/4% Gel, 1/4# Celloseal, 2% Cacl plus 200 sacks Class C w/2% Cacl circulated 25 sacks to pit 9/26/82.

Set 4120' of 5 1/2" Casing 15 1/2#, Cemented with 150 sacks 50/50 Poz w/6% CF9, 3% TF4, 2% AF-S, 3% Cacl plus 160 sacks Class C w/3% Cacl. 10/6/82

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

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

SIGNED _____ TITLE Operator DATE 10-6-82

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS DATE _____

CONDITIONS OF APPROVAL OCT 8 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

See Instructions on Reverse Side