

C/SF

FEB 14 1983

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

C.C.D.
ARTESIA, OFFICE
NM 88210

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 **OIL & GAS**
- 2. NAME OF OPERATOR **MINERALS MGMT. SERVICE**
ROSWELL, NEW MEXICO
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.)
1780' FSL & 1980' FWL Section 23,
AT SURFACE: T16S, R31E
AT TOP PROD. INTERVAL: T16S, R31E
AT TOTAL DEPTH:

- 5. LEASE NAME
- 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
- 7. UNIT AGREEMENT NAME
- 8. FARM OR LEASE NAME
Rutter Federal
- 9. WELL NO.
2
- 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
Eddy
- 13. STATE
NM
- 14. API NO.
- 15. ELEVATIONS (SHOW DF, KDB, AND WD)
4213.6 GL

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

- | | | |
|--------------------------|--------------------------|-------------------------------------|
| REQUEST FOR APPROVAL TO: | | SUBSEQUENT REPORT OF: |
| TEST WATER SHUT-OFF | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | <input type="checkbox"/> |
| (other) | | |

(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.)*

Well Spudded 1/18/83, Set 1097' API 8 5/8" Casing and circulated cement w/500 Sacks 1/21/83. TD 1/29/83, set 4075' of API 5 1/2" casing, cemented w/310 Sacks.

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

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

SIGNED [Signature] TITLE Operator DATE February 2, 1983

ACCEPTED FOR RECORD

(ORIG. SGD.) DAVID R. GLASS (This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL: FEB 11 1983

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO