

C/SF

Artesia, NM 88210

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 ☒ gas ☐ other ☐
well well
2. NAME OF OPERATOR
Joe L. Tarver
3. ADDRESS OF OPERATOR
P. O. Box 763, Hobbs, NM 88241
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 330' FNL & 1661' FEL
AT TOP PROD. INTERVAL:
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 <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) <input type="checkbox"/>	<input type="checkbox"/>

5. LEASE
LC-055561
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
South Red Lake Grayburg
8. FARM OR LEASE NAME
9. WELL NO.
45
10. FIELD OR WILDCAT NAME
Red Lake Grayburg - 577
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 35, T17S, R27E
12. COUNTY OR PARISH
Eddy
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

RECEIVED BY
NOV 13 1984
O. C. D.
ARTESIA, OFFICE

(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.)*

Cemented 8 5/8" 24# K-55 casing at 120' with 60 sacks
Dowell Tailend cement 2% calcium chloride. Cement
circulated. Plug down 1:10 AM 10/6/83.

Cemented 5 1/2" 17# N-80 casing at 1875 with 200 sacks
lite cement 2% calcium chloride & 225 sacks Dowell Tailend
cement 2% calcium chloride. Plug down 4:13 PM 10/12/83.

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

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

SIGNED William L. Loh TITLE Agent DATE 11/6/84

(This space for Federal or State office use)

APPROVED BY Gw & TITLE _____ DATE _____
CONDITIONS OF APPROVAL NOV 9 1984

Carlsbad

•See Instructions on Reverse Side