

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 ☒ SWD

2. NAME OF OPERATOR

Damson Oil Corporation

3. ADDRESS OF OPERATOR

3300 N. "A", Bldg. 8, Suite 100 Midland, TX

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1650' FNL & 330 FWL

AT TOP PROD. INTERVAL: Unit E Sec. 20, T17S,

AT TOTAL DEPTH: R30E

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:

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5. LEASE

LC 054988-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jenkins Federal

9. WELL NO.

1 SWD

10. FIELD OR WILDCAT NAME

Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 20, T17S, R30E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. API NO.

NA

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3,651' DF

(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.)*

The captioned well started small water flow from the annulus of the 10-3/4" surface casing and the 7" production string on 9-17-86. At that time I contacted Mike Williams with NMOCD about repair and shut off. He recommended that we pull tubing and packer, run RBP to top perf, load hole with water. Run cement bond log to determine top of cement in relation to base of salt. If 7" is not bonded, perforate 7" at base of salt and squeeze with 100 sx. Rig up to 7" and 10-3/4" annulus. Pump tracer down annulus if tracer goes to top of salt section. Bradenhead squeeze with 150 sx.

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

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

SIGNED Leroy Hurt TITLE Prod. Supt. DATE 9-22-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: