

0127

NEW MEXICO OIL AND GAS COMMISSION

Form 9-321
(May 1963)

UNITED STATES

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.

NM 0555569

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED BY

JUN 14 1984

O. C. D.

ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Green Federal

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Artesia Queen Grayburg
San Andres

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

Sec. 31, T-17S, R-29E

12. COUNTY OR PARISH 13. STATE

Eddy

New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☒

CHANGE PLANS

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(Other)

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.) *

1. POH with tubing and packers.
2. Locate casing leak with packer and bridge plug.
3. Squeeze casing leak with 100 sx cement.
4. Rerun tubing and packers.
5. Pressure test annulus to 300 psi for 30 minutes.
6. Return well to an active injector.

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

SIGNED Ron Brown Ron Brown

TITLE Senior Engineer

DATE 5-23-84

(This space for Federal or State office use)

APPROVED BY P. P. Ritchie
CONDITIONS OF APPROVAL, IF ANY:

TITLE P.E.

DATE 6/13/84

*Subject to
State approval*

*See Instructions on Reverse Side