

CISF

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Drawer DD
Artesia, 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 ☐

2. NAME OF OPERATOR

Siete Oil and Gas Corporation

3. ADDRESS OF OPERATOR

P.O. Box 2523, Roswell, New Mexico 88201

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

AT SURFACE: 1650' FNL, 990' FEL

AT TOP PROD. INTERVAL: same

AT TOTAL DEPTH: same

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) surface

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE

NM 14840

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dalton Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Grayburg-Jackson - 25-2-6-25

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

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

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

14. API NO.

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

3592'GR

RECEIVED BY

APR 29 1985

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.)*

4/15/85 Spudded 17½" hole at 7:15 p.m.

4/16/85 T.D. 350' at 2:30 a.m. - ran 9 jts (353') of 13 3/8" 54# J-55 casing set at 350' K.B., Dowell Schlumberger cemented with 400 sxs Class "C" Cement - circulated 50 sxs to surface - plug down at 6:30 a.m. - tested BOP to 1000 PSI for 30 minutes - held OK - W.O.C.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

[Signature]

TITLE Consultant

DATE April 23, 1985

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APR 26 1985

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO