Form 9-331

UNITED STATES NM OIL ... ...ISSIC.
Drawer ...
Artesia, NM 88210
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.)

Form Approved.
Budget Bureau No. 42-R1424

5. LEASE NM 54184	C/SF
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Dunn Federal B	
9. WELL NO. 5	
10. FIELD OR WILDCAT NAME Artesia, Q, Gbr	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11, 18S, 28E	

1. oil well ☐   gas well ☐   other   WIW

2. NAME OF OPERATOR ✓
DEPCO, INC. ✓

3. ADDRESS OF OPERATOR
800 Central, Odessa, Texas 79761

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)   1980' FSL & 550' FEL, Sec. 11,
AT SURFACE: T-18s, R-28e
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

12. COUNTY OR PARISH	13. STATE
Eddy	New Mexico

14. API NO.

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

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

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	☐	
FRACTURE TREAT	☐	☐	
SHOOT OR ACIDIZE	☐	☐	
REPAIR WELL	☐	☒	
PULL OR ALTER CASING	☐	☐	
MULTIPLE COMPLETE	☐	☐	
CHANGE ZONES	☐	☐	
ABANDON*	☐	☐	
(other) Repair Csg.			

(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.)*

10-14-85:   Pulled pkr & tbg.   Ran BP to 2100' & press up on csg to 500#.
Found leak @ 34'.   10-15-85: Pulled BP. washed 9 5/8" 40# csg
over 7" csg to 68'.   Ran a string shot & backed off 2 jts 7" csg
& pulled .   Replaced w/2 jts 7" 23# csg.   10-16-85: Reran tbg
& pkr @ 2215' & press up csg to 500#.   Held OK.   Test witnessed
by John Roberson of N.M.O.C.D.

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

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

SIGNED _____ R .L. Denney TITLE Chief Prod Clerk DATE 11-11-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NOV 15 1985

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO

Form 9–331
Dec. 1973

NM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

O. C. SUNDRY NOTICES AND REPORTS ON WELLS

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Form Approved.
Budget Bureau No. 42–R1424

c/SF

5. LEASE *54184* NM ~~29713~~	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Dunn Federal B	
9. WELL NO. 5	
10. FIELD OR WILDCAT NAME Artesia, Q, GBR	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11, 18S, 28E	
12. COUNTY OR PARISH Eddy	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD)	

1. oil well ☐   gas well ☐   other   WIW

2. NAME OF OPERATOR
   DEPCO, INC. ✓

3. ADDRESS OF OPERATOR
   800 Central, Odessa, TX 79761

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
   AT SURFACE: 1980' FSL & 660' FEL, Sec. 11
   AT TOP PROD. INTERVAL: T-18s, R-28e
   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	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☐	☐
REPAIR WELL	☐	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☐	☐
(other) Find holes in csg		

(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.)*

DEPCO, INC. plans to dig working pit to back flow well, release pkr and find holes in csg.

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

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

SIGNED _R. L. Denney_ R. L. Denney TITLE Chief Prod Clerk DATE 9-4-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 9 3c-85
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side