

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 well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR

Forister & Sweatt

3. ADDRESS OF OPERATOR

PO Box 161, Artesia, NM 88210

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

AT SURFACE: 2080 FNL 560 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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☐

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5. LEASE

LC 062404

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hewitt Fred.

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Loco Hills Q.G.SA.

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

Sec 20 T18S R29E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

14. API NO.

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

3523 Gr.

(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.)*

1. Perforated San Andres 2974 - 2980 10 holes, 2916-2928 12 holes, 2886 - 2894 4 holes, 26 total.

Treated with 1500 gal 15% acid - Frac with 25,000 gals gelled KCL water, 230 sacks 20/40 sand and 60 sacks 10/20 sand.

2. Perforated Metex-grayburg 2750 - 2780 30 holes

2702 - 2710 8 holes

2690 - 2696 6 holes

2674 - 2680 6 holes

2654 - 2666 12 holes 62 total.

Treated with 2500 gal 15% acid - frac with 60,000 gal gelled KCL water with 840 sacks 20/40 sand and 200 sacks 10/20 sand.

3. Ran tubing and rods and put on pump.

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

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

SIGNED

David R. Glass

TITLE

Partner

DATE

12-2-82

ACCEPTED FOR RECORD

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL

DEC 8 1982

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side