

95F

UNITED STATES Artesia, NM 88210
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE
NM-0129-426

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Sullivan Federal

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Antelope Sink

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 5, T19S, R24E

12. COUNTY OR PARISH | 13. STATE
Eddy | New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3820 GL

RECEIVED BY
SEP 11 1985
O. C. D.
ARTESIA, OFFICE

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
Superior Oil Company, The ✓

3. ADDRESS OF OPERATOR
P.O. Box 3901, Midland, Texas 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
660' FSL & 660' FWL
AT SURFACE:
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	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input checked="" type="checkbox"/>
(other)	<input type="checkbox"/>		<input type="checkbox"/>

(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.)*

- Set CIBP @ 6725' in 5-1/2" casing on 8-1-84.
- Set CIBP @ 6570' in 5-1/2" casing and capped with 3.5 sxs cement on 8-1-84. Calculated top of cement at 6535'.
- Cutoff 5-1/2" casing at 5047'. Pulled and recovered all casing above cut.
- Loaded hole with 9.5# gel mud.
- Spot 18 sxs cement plug from 5085'-4985' on 8-3-84. WOC 4 hrs and tagged top of cement plug at 5005'.
- Spot 26 sxs cement plug from 3398-3298 on 8-3-84.
- Spot 26 sxs cmt plug from 2147-2047' on 8-3-84.
- Tagged top of cement plug at 2006' on 8-4-84.
- Placed 13 sxs cement plug from 50' to surface.
- Cutoff well head. Installed Dry Hole marker. WELL PLUGGED AND ABANDONED 8-5-84.

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

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

SIGNED G.E. Tate TITLE Division Opr. Supt DATE 12-6-84
ms G.E. Tate
 Orig. Sgd. _____ (This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 9-10-85
 CONDITIONS OF APPROVAL, IF ANY:

Post ID-2
2-8-85
P+H