

1982

NM OIL CONS. COMMISSION  
Drawer DD  
Artesia, NM 88210Form Approved.  
Budget Bureau No. 42-R1424

## UNITED STATES

O. C. D. DEPARTMENT OF THE INTERIOR

ARTESIA OFFICE 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  
Jack Plemons
3. ADDRESS OF OPERATOR  
Box 385, Artesia, New Mexico 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 990'/N 990'/E 3-19-31  
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 checked="" 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 type="checkbox"/>            |
- (other) \_\_\_\_\_

## 5. LEASE

LC 029353(A)

## 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 7. UNIT AGREEMENT NAME

## 8. FARM OR LEASE NAME

McFadden

## 9. WELL NO.

4

## 10. FIELD OR WILDCAT NAME

Shugart Yates SR - Q - G  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
3-19S-31E

## 12. COUNTY OR PARISH

Eddy

## 13. STATE

New Mexico

## 14. API NO.

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

(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.)\*

This well was spudded on 9-24-81.

We ran 701' of 8 5/8" casing cemented with 350 sacks.

We ran 2659' of 7" casing cemented with 300 sacks. Circulated to surface.

RECEIVED  
JUN 3 1982

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED Mary King TITLE Agent

DATE

June 2, 1982  
JUN 3 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

OIL & GAS  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO  
RECEIVED FOR RECORD  
Ft.  
JUN 3 1982  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO