

c/SF

RECEIVED BY  
DEC 11 1984  
O. C. D.  
SUMMARY NOTICES

ARTESIA, NM 88210

Form Approved.  
Budget Bureau No. 42-R1424

(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  
P.O. Box 385, Artesia, New Mexico 88210
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 990/N line, 360'/E line  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE  
LC 029353A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
McFadden Federal
9. WELL NO.  
5Y
10. FIELD OR WILDCAT NAME  
Shugart-Y-SR-Q-G
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
3-19S-31E
12. COUNTY OR PARISH: 13. STATE  
Eddy New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input checked="" type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other)	<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.)\*

We set a permanent type plug at 3710', tested 3660-3702 - water

Set a permanent type plug at 3650', well making 10 bbls. oil per day.

Subsurface Safety Valve: Manu. and Type

Set @

Ft.

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

SIGNED

TITLE Agent

DATE

12-3-84

(This space for Federal or State office use.)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

DEC 10 1984

Carlsted

\*See Instructions on Reverse Side

