NM OIL CONS. COMMISS

Drawer DD Form 9-331 Form Approved. Artesia, NM Dec. 1973 Budget Bureau No. 42-R1424 5. LEASE UNITED STATES DEPARTMENT OF THE INTERIOR NM-025777 6. IF INDIAN, ALLOTTEE OR TRIBE NAME **GEOLOGICAL SURVEY** 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a difference reservoir. Use Form 9–331–C for such proposals.) 8. FARM OR LEASE NAME RECEIVED BY Geronimo Federal gas \mathbf{X} well well other WELL NO. 2. NAME OF OPERATOR 10. FIFLD OR WILDCAT NAME Siete Oil and Gas Corporat Shugart - Y-SR-Q 3. ADDRESS OF OPERATOR ARTESIA, OFFICE SEC., T., R., M., OR BLK. AND SURVEY OR P.O. Box 2523, Roswell, NM **AREA** 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 AT SURFACE: 2310' FNL, 2310' FSL FEL 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: same New Mexico Eddy AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, 30-015-24927 REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 3726' GR REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone PULL OR ALTER CASING change on Form 9-330.) MULTIPLE COMPLETE **CHANGE ZONES ABANDON*** (other) 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.)* 8/28/85 - Request for authorization to comingle the Penrose Zone (3754.5' to 3774') with the Grayburg Zone (4268' to 4284.5') Subsurface Safety Valve: Manu. and Type ... Ę,

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

_ DATE <u>November 15,</u> TITLE _ <u>Production</u> Supervisor

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

THE PROPERTY OF THE PARTY OF TH

DATE

Subject to Like Approval by State

*See Instructions on Reverse Side

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