

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Artesia, NM 88210

## 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 ☒ gas ☐ other ☐  
well well

## 2. NAME OF OPERATOR

Siete Oil and Gas Corporation

## 3. ADDRESS OF OPERATOR

Post Office Box 2523

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

AT SURFACE: 330 FNL' 2310' FEL

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

## 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

## REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☒MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON\* ☐(other) ☐

## SUBSEQUENT REPORT OF:

☐☐☐☐☐☐☐☐☐

## 5. LEASE

LC-029392B

## 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED BY

## 7. UNIT AGREEMENT NAME

OCT 15 1984

## 8. FARM OR LEASE NAME

Scottsdale

O. C. D.

ARTESIA, OFFICE

## 9. WELL NO.

1

## 10. FIELD OR WILDCAT NAME

Shugart-Queen

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

Sec. 27: T-18-S, R-31-E

## 12. COUNTY OR PARISH

Eddy

## 13. STATE

NM

## 14. API NO.

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

3629 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.)\*

On our Application to Drill, dated August 22, 1984, please be advised that we have changed our production casing from 4 1/2" 10.5# to 5 1/2" 15.5# and will circulate cement to surface.

Subsurface Safety Valve: Manu. and Type

Set @ \_\_\_\_\_ PL

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

SIGNED

TITLE

President

DATE

October 5, 1984

APPROVED BY

TITLE

AREA MANAGER  
CARLSBAD RESOURCE AREA

DATE

10 12 84

CONDITIONS OF APPROVAL, IF ANY: