

45F

UNITED STATES
DEPARTMENT OF THE INTERIOR
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 ☒ gas ☐ other ☐
well well

2. NAME OF OPERATOR

Siete Oil and Gas Corporation ✓

3. ADDRESS OF OPERATOR

P.O. Box 2523, Roswell, New Mexico 88201

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

AT SURFACE: 950' 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

NM 025777

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Geronimo Federal

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Shugart-Queen V-SR-Q-G

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

Sec. 24: T-18-S, R-31-E

12. COUNTY OR PARISH

Eddy

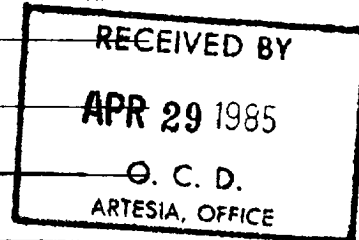
13. STATE

New Mexico

14. API NO.

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

3720'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.)*

4/11/85 T.D. 4702' - at 9:30 p.m.

4/12/85 T.D. 4702' - ran Schlumberger DOL-MSFL, NGT, EPT, EPT-X-Plot & Cyberlook - ran 118 jts (4723.05") 4½" 10.5 J-55 S.T.&C. casing set at 4700' K.B. - shoe at 4701' - float at 4691' - cemented with 1730 sxs Dowell Lite Weight 3 - tailed in with 460 sxs 50/50 poz. Class "C" - circulated 50 sxs to surface.

4/13/85 W.O.C.

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

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

SIGNED [Signature] TITLE Consultant DATE April 23, 1985

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: [Signature]

APR 26 1985

*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO