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O. C. D.

ARTESIA OFFICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYNM OTT. COND.
Drawn by
Estesia, NM 88210Form Approved.
Budget Bureau No. 42-R1424

9/5F

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

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: 1850' 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) Production Casing ☒

SUBSEQUENT REPORT OF:

☐☐☐☐☐☐☐☐

5. LEASE

LC029392B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Scottsdale Federal

9. WELL NO.

3

10. FIELD OR WILDCAT NAME

Shugart

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

Section 27, 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)

3627' 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.)*

6/27/85 - L & M Rig #1 T.D. 7 7/8" hole to 4500' @4:30 p.m. - Schlumberger ran CNL, LDT, GR, Caliper, DLL, MSFL Logs.

6/28/85 - L & M Rig #1 ran 110 jts. 5 1/2", 17#, J-55 casing set @4499' KB - shoe set @4500' - float @4489' - Dowell Schlumberger cemented with 2100 sxs Lt. Wt. 3, 10# salt/sx, 1/2# celoflake - tailed in 21th 300 sxs Lt. Wt. 5, 6# salt/sx, 1% fluid loss - circulated to surface - plug down @9:00 p.m. - W.O.C.

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

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

SIGNED H. D. Justice TITLE Consultant DATE July 2, 1985

(This space for Federal or State office use)

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

JUL 8 1985

*See Instructions on Reverse Side

CARLSBAD, NEV. MEXICO



62-172
JUL - 9 1965
FBI