

C/SF

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Drawer DD  
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 well  gas well  other

2. NAME OF OPERATOR  
Barber Oil, Inc. ✓

3. ADDRESS OF OPERATOR  
P.O. Box 1658 Carlsbad, NM 88220

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FNL & 1980' FWL UL-C  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

5. LEASE  
LC-050797

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME RECEIVED

8. FARM OR LEASE NAME JAN 24 1983  
Turner Federal

9. WELL NO. O. C. D.  
6 ARTESIA, OFFICE

10. FIELD OR WILDCAT NAME  
Russell-Yates

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 13, T20S, R28E

12. COUNTY OR PARISH Eddy 13. STATE NM

14. API NO.

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

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

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>

(other) Convert Injection Well to Production

*Intent*

(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.)\*

Run approximately 840' of 2 3/8" EUE tubing with 1 1/2" rod pump.  
Work to begin as soon as possible.

RECEIVED

JAN 19 1983

OIL & GAS  
MINERALS & GTE. SERVICE  
ROSEMBO, NEW MEXICO

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED [Signature] TITLE President DATE 1-17-83

APPROVED [Signature] (This space for Federal or State office use)  
(Orig. Sgd.) PETER W. CHESTER TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

JAN 21 1983  
FOR  
JAMES A. GILLHAM  
DISTRICT SUPERVISOR

See Instructions on Reverse Side