

C/SF

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 ☐ APR 19 '88
2. NAME OF OPERATOR
Union Pacific Resources Company O. C. D.
3. ADDRESS OF OPERATOR ARTESIA, OFFICE
1000 Louisiana, Suite 3000, Houston, TX 77002
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FSL & 660' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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) <u>Change of operator</u>		

5. LEASE
NM-04557
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Big Eddy
8. FARM OR LEASE NAME
Big Eddy
9. WELL NO.
33
10. FIELD OR WILDCAT NAME Hackberry Bone Spring & Hackberry Strawn, South
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 4, T20S, R31E
12. COUNTY OR PARISH Eddy 13. STATE New Mexico
14. API NO.
Bone Springs 30-015-20369
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3494'DF, 3494.5'KDB, 3483'WD

(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.)*

Change Operator from: BASS ENTERPRISES PROD. CO.
UNION PACIFIC RESOURCES CO. (AGENT)

Well is producing on a lease basis instead of unit basis.

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

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

SIGNED Kanda E. Richmond TITLE Regulatory Analyst DATE March 25, 1988

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR RECORD
DATE _____

SJS
APR 15 1988