

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.)

RECEIVED

1. oil ☐ well gas ☒ well other ☐

2. NAME OF OPERATOR
TXO Production Corp.

SEP 29 '88

3. ADDRESS OF OPERATOR
900 Wilco Bldg. Midland, ARTHUR OFFICE 79701

O. C. D.

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2310' FNL & 1980' FWL Unit F
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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

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(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.)*

4-19-86 Spt 45sx 2% "C" CaCl plug @ 3600'. Spt. 75sx "C" 2% CaCl plug @ 2750'.
4-20-86 12 hr. SICP 50#. TIH. Tag cmt @ 2554'. Spt 35sx "C" 3% CaCl plug @ 2200'. Spt 35sx "C" 3% CaCl @ 550'. POH. ND BOP. ND WH. Cut off braidenhead. Dmp 80sx "C" 3% CaCl plug @ surface. Weld on plate w/dry hole mrkr. Well P & A'd

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

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

SIGNED Erica Anderson TITLE Engineering Asst. DATE 4-21-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 9-27-88
CONDITIONS OF APPROVAL, IF ANY:

Post 10-2
4-25-86
P&A