

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

C/SF

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
Cities Service Company /
3. ADDRESS OF OPERATOR
Box 1919 - Midland, Texas 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 660' FSL & 1980' FEL
AT SURFACE: Same as above
AT TOP PROD. INTERVAL: Same as above
AT TOTAL DEPTH: Same as above

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) Well remedial work	

5. LEASE NM 886	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Little Box Canyon	
9. WELL NO. 2	ARTESIA, OFFICE
10. FIELD OR WILDCAT NAME Undesignated Strawn	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12-T21S-R21E	
12. COUNTY OR PARISH Eddy	13. STATE New Mexico
14. API NO. 30-015-22196	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 4478' 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.)*

O.T.D. 8370' Shale & Lime, P.B.T.D. 7575'. Workover complete. MIRU completion unit and set a CIBP @ 7600' and dump 3 sacks of cement on top of CIBP for a new PBTD of 7575'. Perforated the Strawn w/2 SPF @ 7397 - 7403' & 7406 - 7409'. Ran and set 2-7/8"OD tubing @ 7309' with a packer set @ 7295'. Dropped bar and broke disc. No GTS in 1 hr. Acidized Strawn Perfs 7397 - 7409' with 3000 gals. 7-1/2% HCL acid with additives and 1000 SCF of N2/barrel. (Total of 98,000 SCF of N2). Max press 5000#, min press 3900#, AIR 7.2 BPM, ISIP 3500#, 10 min SIP 3350#. 24 hr. SITP DW 1371#. Flowed on 3 Pt. tests as follows:

TIME	FTP	COKE	GR	BP
1 hr.	970#	6/64"	104 MCFD	500#
1 hr.	680#	7/64"	128 MCFD	500#
1 hr.	508#	10/64"	31 MCFD	500#

CAOF Strawn Perfs 7397 - 7409' = 148 MCFPD

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

Prod.

SIGNED Elmer Startz TITLE Region Opr. Mgr. DATE March 8, 1982

(This space for Federal or State office use)

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