9-331 N. M. C D. C. COPY	Form Approved. Budget Bureau No. 42-R1424
Dec. 1973 UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	NM 9531 C
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a difference reservoir. Use Form 9–331–C for such proposals.)	
1. oil gas well well other	Mahun Federal 9. WELL NO.
2. NAME OF OPERATOR	
Petroleum Development Corp. V	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Under Morrow Window Finning Prints
3. ADDRESS OF OPERATOR 9720 B Candelaria NE - Albuquerque, N. M.	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION GLEARET, det space 1)	Sec. 27, T21S, R22E
below.) AT SURFACE: 2250' FSL - 786' FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Eddy New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 4659 GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF	
	• • • • • • • • • • • • • • • • • • •
	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	
ABANDON*	A start and a start and a start
(other)	
 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.)* March 31, 1979 Spotted a 15 sack plug at 4160' and W.O.C. Tagged plug at 4016' 	
$2 - C_{\text{eff}} + h + 1/2^{-1} + 1/2 + 1/$	
3. Run tubing to 3650' and spotted a 50 sack plug. W.O.C. and tagged plug at 3495	
4. Pulled tubing to 2050' and spotted a 50 sack plug.	
5. Cut off well head, placed a 10 sack surfac	e plug. Installed dry hole marker
and rigged down	
6. Will;notify when location is ready for in	spection.
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
ACB Anna Acont	date 4/1 6/79
Sidilly	
APPROVED BY The J. Jara ACTING DISTRICT E	office use) NGINEERJUL_5 - 1979
CONDITIONS OF APPROVAL, IF ANY:	
2	
*See Instructions on Rever	se Side

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