Form 9-331	Form Approved. Budget Bureau No. 42–R1424
Dec. 1973 UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR MAR 0.3 '88	LC 067144
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON TWELLS	7. UNIT AGREEMENT NAME
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME Big Eddy
1. oil gas well X other	9. WELL NO.
2. NAME OF OPERATOR Bass Enterprises Production Co.	66
3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Indian Flat Morrow
0 Box 2760, Midland, Texas 79702-2760	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec. 25, T21S R28E
below.) AT SURFACE: 2130' FWL & 1980'FSL Unit Letter K	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	Eddy New Mexico
6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	14. API NO. 30-015-22682
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3217' GL 3235' KB
TEST WATER SHUT-OFF	CA AR
SHOOT OR ACIDIZE	(NOTE: Report results of multiple completion or zero
PULL OR ALTER CASING	change on Form 9–330.)
CHANGE ZONES	change on Form 9–330.)
ABANDON*	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statistic including estimated date of starting any proposed work. If well is comeasured and true vertical depths for all markers and zones pertine	directionally drilled, give subsurface locations and
RECOMPLETION PROPOSAL IN ATOKA RU Pulling unit, Kill well w/10# Brine. ND Tree Hydraulic BOP equipment. Pull TBG out of hole. set Baker Model S CIBP ± 12,000' POOH & Dump ba	Run in hole with wireline &
Run in hole w/Baker model DB double grip packer circulate packer fluid, test backside to 1500 P ND BOP & NU tree. Test tree to 5000 #.	to ⁺ 11,550' SI.
RU wireline w/10,000# Lubricator. Perforate Ato	ka 11,650-11,666' using
SSB-111 charges. 4 shot per ft. total of 62 ho	les. After well stabilizes.
POH and RD wireline. SWAB & flow test. Acidize with 1500 gal 15% HC	I w/additives.
Test & clean around location. Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct SIGNED TITLE SCIED	K DATE 2-23-88
(This space for Federal or State of APPROVED BY	DATE
CONDITIONS OF APPROVAL, IF ANY:	· · · · · · · · · · · · · · · · · · ·

*See Instructions on Reverse Side