UNITED S DEPARTMENT OF **GEOLOGICAL**

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	5. LEASE NM-17200 6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
SUNDRY NOTICES AND REPORTS ON WELL (Do not use this form for proposals to drill or to deepen or plug back to a diffreservoir, Use Form 9-331-C for such proposals.)	erent		
1. oil gas well other	8. FARM OR LEASE NAME Southeast Indian Basin 9. WELL NO.		
 2. NAME OF OPERATOR Chama Petroleum Company 3. ADDRESS OF OPERATOR P.O. Box 31405, Dallas, Texas 75231 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space below.) 660° FNL & 660° FEL AT SURFACE: Same AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOT REPORT, OR OTHER DATA 	Sec. 23, T-22-5, R-23-E 12. COUNTY OR PARISH 13. STATE Eddy New Mexico 14. API NO. 15. ELEVATIONS (SHOW DF, KDB, AND WD) 4141.5' GL		
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (cther) SUBSEQUENT REPORT OF BUBSEQUENT REPORT OF SUBSEQUENT REPORT OF D D D D D D ACTIVITY SUBSEQUENT REPORT OF D D D ACTIVITY SUBSEQUENT REPORT OF D D D ACTIVITY SUBSEQUENT REPORT OF D D D D D D D D D D D D D	(NOTE: Report results of multiple completion or zone change on Form 9–330.)		
 DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clear including estimated date of starting any proposed work. If we measured and true vertical depths for all markers and zones p 	ell is directionally drilled, give subsurface locations and		
1-13-83: 200# tubing pressure, 250# casing p	bbbed estimated 55 bbls. load water, 5', casing pressure increased to 270#,		
swabbed estimated 75 hbls. load wa	asing pressure, fluid level 4500' from surface, load water with fluid level at 7500' from surface free, laid down swab, ran bottom hole pressure closed in well		
1-15-83: Closed in for bottom hole pressure			

1-16-83: Retrieved bottom hole pressure bombs at 7:00 P.M., fluid level estimated 6000' from surface, 150# tubing pressure, 250# casing pressure

Subsurface Safety Valve: Manu. and Type ______ Set @ ____ Ft

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

SIGNED	TITLE	President	DATE January 25, 1983	
	ACCEPTED FOR RECORD			
	(ORIG. SGD.) DAVID RESEARCE	ASS Federal or State office use)	DATE	
APPROVED BY	F APPROV JAN 28 1983	LE	DATE	
	MINERALS MANAGEMENT SERVICE			
	ROSWELL, NEW MEXICO	s and Alamana Side		
Saa Instructions on Reverse Side				