UNITED STATES

Artosa in the	5. LEASE
DEPARTMENT OF THE INTERIOR	NM-1044698
CSF GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR PRIBE NAME RECEIVED
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAMEY
	Superior Federal APR 1 9 1982
(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.)	8. FARM OR LEASE NAME
1. oil gas n	Superior Federal O C D.
well well other	9. WELL NO. ARTESIA, OFFICE
2. NAME OF OPERATOR	6 1 AATLSIN, OTTICE
THE PETROLEUM CORPORATION	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR Midland,	East Burton Flat
One Marienfeld Place, Suite 555 Tx.79701	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.) AT SURFACE: 660' FSL and 1980' FWL	Sec. 6 - T20S - R29E
AT TOP PROD. INTERVAL: same	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH: same	Eddy New Mexico
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15 ELEVATIONS
,	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3274.4 GR
TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE \(\) \	50500500500500
PULL OR ALTER CASING	(NOTE Report results of multiple completion or zone
MULTIPLE COMPLETE	3-330.3
CHANGE ZONES	₩ APR 6 1982 ₩
ABANDON*	150 mm o 1002 (21)
(other)	OIL & GAS
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat	e all pertinent details and give pertinent dates
including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	irectionally deilled - give substitute and
1. Ran 4 $1/2$ " 13.5# and 11.6#, set at 11,600	'. Cemented in 2 stages with 700
sacks and 1075 sacks. DV Tool at 8995'.	(1-30-82)
2. 3-17-82 Ran 4 1/2" production packer and	set at 10710'.
3. 3-18-82 Perf. Morrow 11267'-11314' (8 ho	
4. 3-20-82 Perf. Morrow 11177'-11236' (11 h	oles)
5. 3-26-82 Perf. Strawn 10282'-10294' (25 h	
6. 3-28-82 Acidize Strawn 10282'-10294' with	h 2500 gallons 15% HCl acid.
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED Mike hang fore TITLE District Supt	· DATE4-2-82
ACCEPTED FOR RECORD (This space for Federal or State off	
	·
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE

*See Instructions on Reverse Side