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Form 9-331  
Dec. 1973

Form Approved.  
Budget Bureau No. 42-R1424

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

TXO Production Corp. ✓

3. ADDRESS OF OPERATOR

900 Wilco Building, Midland, Texas 79701

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

GEO FNL

AT SURFACE: 1980 FSL & 1980 FEL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐

(other) \_\_\_\_\_

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

5. LEASE

NM 0556290

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Williamson Federal

9. WELL NO.

5

10. FIELD OR WILDCAT NAME

E Burton Flat (Bone Springs)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 2, 20-S, 29-E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3280.7 GL 3295.9 GL

(NOTE: Report results of multiple completion in one charge on Form 9-331-C)

RECEIVED BY

DEC 26 1985

O. C. D.

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.)

11-21-85 The well has been shut-in since the recompletion in May 1985.

We potentialized the well and it is now shut-in and and we are waiting on a gas market.

ACCEPTED FOR RECORD

DEC 5 1985

CARLSBAD, NEW MEXICO

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Licia Henderson TITLE Engineering Asst. DATE 11/21/85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: