

C/SF

NM OIL CONS COMMISSION
Artesia, NM 88210

Form Approved.
Budget Bureau No. 42-R1424

RECEIVED
JUL 2 1985
O.C.D.
ARTESIA, OFFICE

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
Canon Energy, Inc. ✓
3. ADDRESS OF OPERATOR
13140 Coit Road, Suite 505, Dallas, Tx. 75240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2201 FSL & 556 FWL Unit L
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

- | REQUEST FOR APPROVAL TO: | SUBSEQUENT REPORT OF: |
|---|-------------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* <input type="checkbox"/> | <input type="checkbox"/> |
| (other) <input type="checkbox"/> | X Run & Cement Surface Casing |

5. LEASE
N.M. 25345
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Canon Abbott Federal
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Wildcat - Bone Spring
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 29, T-21-S, R-25-E
12. COUNTY OR PARISH
Eddy
13. STATE
N.M.
14. API NO.
Not Avail.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3597' G.L.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

6-23-85 Spud Well at 12:15 PM . Drilled 12 1/4" Hole.

6-26-85 Reached T.D. of 1495'. Ran 37 joints of 8 5/8" 24#, J-55, ST&C Casing to 1495'. Cement with 650 Sacks of Lite Cement W/1/4# Flocele 2 % CaCl Plus 150 Sacks of Class "C" Cement W/2 % CaCl. Plug down at 9:30 AM 6-26-85. Circulated out 270 Sacks.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Cons. Engineer DATE 6-28-85

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: [Signature]

JUL 1 1985