

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
BASS ENTERPRISES PRODUCTION CO.
3. ADDRESS OF OPERATOR
P.O. BOX 2760, MIDLAND TEXAS 79702-2760
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 460' FSL & 330' FWL of Unit Letter U.
AT TOP PROD. INTERVAL: U.
AT TOTAL DEPTH: Same as above

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

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

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

(other) _____

5. LEASE
LC - 060572-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
BIG EDDY UNIT
8. FARM OR LEASE NAME
BIG EDDY UNIT
9. WELL NO.
112
10. FIELD OR WILDCAT NAME
E. Avalon Bone Spring
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 6, T21S R28E
12. COUNTY OR PARISH
Eddy
13. STATE
New Mexico
14. API NO.
30-015-25818
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3190.1' GL

(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.)*

Buddy Jenkins with Bass called (BLM) Shannon Shaw for Plugging instructions. Plugs are to be set as follows.
Plug No.1 - Set 100' plug across top of Bone Spring.
Plug No.2 - Set 100' plug across intermediate casing shoe. Run in & tag plug per BLM orders.
Plug No.3 - Set 100' plug 50' in & 50' out of surface casing.
Plug No.4 - Set 15 sx cement plug at surface.
Set dry hole marker, & clean around location.

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

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

SIGNED R.C. Houtchen R.C. Houtchen Sr. Prod. Clerk DATE Nov. 5, 1987

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE 11/9/87
CONDITIONS OF APPROVAL, IF ANY:

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

GPO : 1981 O - 347-156

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SEMI-ANNUAL REPORTS AND NOTICES

These reports are to be submitted to the nearest Federal office or State office having jurisdiction over the well.

1. Name of well (including location, depth, and other identifying data)

2. Name of owner (including address, city, state, and zip code)

3. Name of operator (including address, city, state, and zip code)

4. Name of person submitting report (including address, city, state, and zip code)

5. Date of report (month, day, and year)

6. Name of well (including location, depth, and other identifying data)

7. Name of owner (including address, city, state, and zip code)

8. Name of operator (including address, city, state, and zip code)

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13. Name of operator (including address, city, state, and zip code)

14. Name of person submitting report (including address, city, state, and zip code)

15. Date of report (month, day, and year)

16. Name of well (including location, depth, and other identifying data)

17. Name of owner (including address, city, state, and zip code)

18. Name of operator (including address, city, state, and zip code)

19. Name of person submitting report (including address, city, state, and zip code)

20. Date of report (month, day, and year)

21. Name of well (including location, depth, and other identifying data)

22. Name of owner (including address, city, state, and zip code)

23. Name of operator (including address, city, state, and zip code)

24. Name of person submitting report (including address, city, state, and zip code)

25. Date of report (month, day, and year)

26. Name of well (including location, depth, and other identifying data)

27. Name of owner (including address, city, state, and zip code)

28. Name of operator (including address, city, state, and zip code)

29. Name of person submitting report (including address, city, state, and zip code)

30. Date of report (month, day, and year)