

2/5F

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  
Texas American Oil Corporation ✓

3. ADDRESS OF OPERATOR  
300 W. Wall - Suite 400 Midland, TX. 79701

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980' FNL & 1650' FEL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

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

5. LEASE  
MM-04051114

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Todd Federal "26"

9. WELL NO.  
2

10. FIELD OR WILDCAT NAME  
Sand Dunes (Cherry Canyon)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 26, T23S, R31E

12. COUNTY OR PARISH  
Eddy

13. STATE  
New Mexico

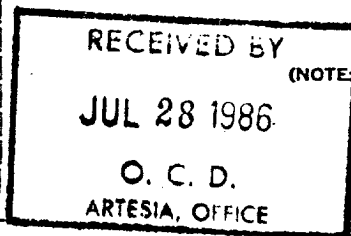
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3444' GL.

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) Change Plans

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(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.)\*

Partnership approval and bids are being solicited for P & A of the above well. Necessary paper work should be in hand within 30 to 45 days.

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

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

SIGNED Carl Jensen TITLE District Manager DATE July 22, 1986

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

JUL 23 1986

\*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO