

UNITED STATES Artesia, NM 88210

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 ☐ RECEIVED BY  
Dry Hole  
AUG 17 1987  
O. C. D.  
ARTESIA OFFICE
2. NAME OF OPERATOR  
J. C. Williamson
3. ADDRESS OF OPERATOR  
P. O. Box 16, Midland, Texas 79701
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980' FSL & 660' FEL  
AT TOP PROD. INTERVAL: 1980' FSL & 660' FEL  
AT TOTAL DEPTH: 1980' FSL & 660' FEL

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 checked="" type="checkbox"/>               | <input type="checkbox"/>            |
| (other) Plug & Abandon <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

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.)\*

PLUGGING PROCEDURE:

- 35 SX. from 2500' to 2400'
- 15 SX. from 50' to surface.

Please note that this well is a reentry of the Penroc Ross Draw #6, a copy of said wells plugging report is attached hereto as Exhibit E.

5. LEASE  
NM-17225 B
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Abby Federal
9. WELL NO.  
2
10. FIELD OR WILDCAT NAME  
Ross Draw - Bone Spring
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
SEc., 28, T-26-S, R-30-E
12. COUNTY OR PARISH 13. STATE  
Eddy New Mexico
14. API NO.  
30-015-21992
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
2971.7

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

RECEIVED  
SEP 9 10 03 AM '83  
BUREAU OF LAND MANAGEMENT  
ROSSETT DISTRICT

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

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

SIGNED [Signature] TITLE Production Secretary DATE 9-8-83

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 8-12-87  
CONDITIONS OF APPROVAL, IF ANY:

Post FD-2  
5-11-84  
P+H