

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.)

RECEIVED

1. oil ☒ well gas ☐ well other ☐

2. NAME OF OPERATOR ☒ FEB 1 1979
Coquina Oil Corporation

3. ADDRESS OF OPERATOR
400 North Marienfeld

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL, 1980' FWL of Sec. 12.
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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) _____

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.)*

This well was completed from Delaware perforation 7/16/78. Current production is uneconomical and it is proposed to plug & abandon the well by setting the following plugs. There are no additional zones which warrant testing.

PLUG #	TYPE	SET AT
1	CIBP w/35' cmt	4500' (Perfs 4590-94')
2	50 sxs	Across 5½" casing stub
3	50 sxs	Across any open hole in excess of 1500'
4	75 sxs	Across 8 5/8" casing shoe
5	15 sxs	Surface

The hole will be loaded with 9.6 lb/gal mud type fluid through open ended tubing prior to plugging. After plugging the casing will be cut off and a dry hole marker installed.

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

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

SIGNED Ron Hilbreath TITLE Production Manager DATE January 31, 1979

(This space for Federal or State office use)

APPROVED BY Joe D. Lora TITLE ACTING DISTRICT ENGINEER

FEB 21 1979