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UNITED STATES

DEPARTMENT OF THE INTERIOR

O. C. D.

GEOLOGICAL SURVEY

ARTIFICIAL OFFICE

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 ☐ gas ☒ other

2. NAME OF OPERATOR

The Superior Oil Company

3. ADDRESS OF OPERATOR

P.O. Box 3901, Midland, TX 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1980' FNL & 1980' FWL

AT TOP PROD. INTERVAL: Section 12

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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

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☒

(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.)*

Start Plugging Operations 2-11-84

1. Set CIBP @ 10,900' in 9-5/8" casing and spotted 14 sks cement on top of plug. Calculate top of cmt plug @ 10,865' ✓
2. Circulate hole with 9.5 lb brine water.
3. Spot 60 sks cement in 9-5/8" csg from 7950 to 7800' ✓
4. Cut off 9-5/8" csg @ 4412'. Pulled 4412' of 9-5/8" csg.
5. Spot 204 sks cmt plug from 4700' to 4400' in 9-5/8" & 13-3/8" csg. ✓
6. Spot 250 sks smt plug in 13-3/8" csg from 1000 to 700' ✓
7. Spot 41 sks cmt plug in 13-3/8" csg from 50' to Surface. ✓
8. Cut off 20" & 13-3/8" casing welded on steel plat and installed dry hole marker. ✓
9. Cleaned up location. Well plugged & abandoned 2-20-84.

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

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

SIGNED G. E. Tate TITLE Division Opr. SUD DATE 3-20-84

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Form Approved.
Budget Bureau No. 42-R1424

5. LEASE

NM-18042

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Sotol Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Wildcat (Bone Springs)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 12, T24S, R31E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3531.5' GR

<5> BLM

Copy to Full Dept. (16)

3-21-84

or zone

Post FD 2
5-31-85

P+H