

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

RECEIVED

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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, Texas 79702

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

AT SURFACE: 1980' FSL, 660' FWL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: Same

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) Change in casing proposal

5. LEASE

NM-28172

6. INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Delta Federal

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Wildcat (Morrow)

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

Sec. 7, T25S, R26E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3413.8 GR

(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.)*

Per conversation between Barry Wirstead (Superior) and W. A. Gressett (NM Oil Conservation) the following additions in pipe will be added to the APD on subject well:

30" casing to be set @ 40' (change from 20" casing)
16" casing to be set @ 350' (addition)

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

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

SIGNED

G. E. Tate

TITLE Prod. Supt.

DATE 8-12-82

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

(This space for Federal or State office use)

TITLE

DATE