88210

Form Approved. Budget Bureau No. 42-R1424

5. LEASE

9. WELL NO.

Eddy

**2918.5** GR

14. API NO.

DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY** 

NM-35607 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME UCBHWW Federal

10. FIELD OR WILDCAT NAME

Ind Brushy Draw- (helle,

AREA Section 25,

12. COUNTY OR PARISH 13. STATE

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

T-26-S, R-29-E

New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS	SUNDRY	NOTICES	AND	REPORTS	ИQ	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.)

OCT 7 1982 other well 2. NAME OF OPERATOR O. C. D. J. C. Williamson ARTESIA, OFFICE 3. ADDRESS OF OPERATOR P. O. Box 16 Midland, Texas 79702

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

AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH:

1980' FSL & 660' FWL 1980' FSL & 660' FWL

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

1980' FSL & 660' FWL

SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* Spud and run and set (other)

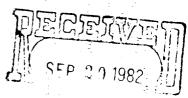
(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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

casing 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.)\*

Spudded well at 10:00 AM 9/14/82.

9/14/82 - Ran 9 joints of 12 3/4", 35# casing (a total of 361.94') set @ 358'. Cemented w/425 sacks of Class "C" w/3% CaCl, w/1/4# flocele/sx. PD @ 11:00 PM 9/14/82. Circulated 200 sacks to surface.



Subsurface Safety Valve: Manu. and Type		OIL & GAS U.S. SEE @ OGICAL SURVEY TO DESINETE NEW MEXICO			
18. I hereby certify that the foregoing is true and correct			Ÿ.		
V ACCEPTED FOR OFFICER		9/17/82			
(This space for Federal or State office use)		₹1 1 4			
APPROVED BY CONDITIONS OF APPROVAL IF ANY:	_ DATE	<del></del>	·		
061 5 1902			* <u>-</u>	- · ·	
U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO See Instructions on Reverse Side		· , <del>-</del>		:	