

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
J. C. Williamson
3. ADDRESS OF OPERATOR
P. O. Box 16 Midland, Texas 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 660' FWL
AT TOP PROD. INTERVAL: 1980' FSL & 660' FWL
AT TOTAL DEPTH: 1980' FSL & 660' FWL
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 type="checkbox"/> | <input type="checkbox"/> |
| (other) Run and Set Casing | | XX |

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.)*

9/18/82 - Ran 13 joints of 8 5/8", 32# K-55 ST & C Casing (584.07') and 59 joints of 8 5/8", 24# K-55 ST & C Casing (2352.89') a total of 72 joints (2936.96') set at 2905' with 150 sacks of Class "C" cement with 2% CaCl. Plug down @ 2:15PM 9/18/82. Ran temperature survey. Top of cement at 2620'. TD inside 2844'.

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

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

SIGNED _____ TITLE Prod. Secretary DATE 9/20/82

APPROVED BY
CONDITIONS OF

ACCEPTED FOR RECORD
(This space for Federal or State office use)
(ORIG. SGD.) DAVID R. GLASS
OCT 8 1982
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

5. LEASE
NM 35607
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
UCBHW Federal
9. WELL NO.
2
10. FIELD OR WILDCAT NAME
Brushy Draw
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 25,
T-26-S, R-29-E
12. COUNTY OR PARISH
Eddy
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
2918.5 GR

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

RECEIVED

OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO