Form 9–331 Dec. 1973	NM OIL CO Drawer DD Artesia, UNITED S	NM 88210	Form Appro Budget Bure 5. LEASE	ved. 2801 No. 42-R1424
	DEPARTMENT OF		NM-20367	
	GEOLOGICAL SURVEY		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
SUNDR	Y NOTICES AND	REPORTS ON WELLS	7. UNIT AGREEMENT NAME	RECEIVENEY
1. oil		or to deepen or plug back to a different als.)	8. FARM OR LEASE NAME MWJ Hunter	DEC 14 1983
well X	gas 🗍 other		9. WELL NO.	O. C. D.
2. NAME OF	F OPERATOR		2	ARTESIA, OFFICE
J. C. Williamson			10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR			Brushy Draw Dylaw Il	
P. O. Box 16 Midland, Texas 79702			11. SEC., T., R., M., OR BEK. AND SURVEY OR	
 LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 			AREA Sec. 35, T-26-S, R-29-E	
AT SURFACE: 660' FNL & 1980' FEL AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			12. COUNTY OR PARISH 13. STATE	
			[·····································	w Mexico
			14. API NO.	
			15. ELEVATIONS (SHOW DF, KDB, AND WD) 2981.4 GR	
REQUEST FO	R APPROVAL TO:	SUBSEQUENT REPORT OF:		
TEST WATER	SHUT-OFF			9
FRACTURE TREAT				R 2
SHGOT OR ACIDIZE			NOTE: Papart results of multiple	
REPAIR WELL PULL OR ALTER CASING			(NOTE: Report results of multiple completion of the completion of the change on Form 9-330.)	
				D9 D9
CHANGE ZONES				
ABANDON*				
(other) Run and set casing X				وت

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.)*

11-16-83 Ran 66 joints 8-5/8" casing 32#, casing set @ 2790'. Cemented w/150 sx Class "C" 2% CaCl. Plug down @ 5:15 PM 11-16-83.

Subsurface Safety Valve: Manu. and Type	Shaeffer 11" double ra	m 3000#Set @ 565Ft.
18. Hereby certify that the foregoing is true		
SIGNED Papie	TITLE Production Secre	tarbx 12-9-83
ACCEPTED FOR RECO	This space for Federal or State office L	ise)
approved by ORIG. SCD. DAY Conditions of approvale (F. ANY, 1983	ID R. GLASS	DATE
RUSWELL, NEW MEXIC)Ø	

*See Instructions on Reverse Side