

C/27

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.)

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: 2173' 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

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) Spud, run and set casing <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

5. LEASE
NM-19609

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Holly "A" Federal

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Brushy Draw Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec., 26, 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)
2907. GR

RECEIVED BY
DEC 22 1983
O. C. D.
ARTESIA, OFFICE

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

RECEIVED
DEC 17 9 31 AM '83
BUREAU OF LAND MANAGEMENT
ROSWELL DISTRICT

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 @ 11:00 AM. 11-28-83

11-28-83 Ran 9 joints 12-3/4" casing 35# set @ 365'. Cemented w/375 sx Class "C" 2% CaCl Plug down @ 7:45 PM 11-28-83.

Subsurface Safety Valve: Manu. and Type Shaeffer 11" double ram 3000# Set @ 565 Ft.

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

SIGNED Roy Glass TITLE Production Secretary DATE 12-9-83

ACCEPTED FOR RECORD (space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS DATE _____
CONDITIONS OF APPROVAL, IF ANY:

DEC 21 1983

*See Instructions on Reverse Side

C/S M

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.)

1. oil well gas well other

2. NAME OF OPERATOR

J. C. Williamson

3. ADDRESS OF OPERATOR

P. O. Box 16, Midland, Texas

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

AT SURFACE: 2173' 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

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 Casing			<input checked="" type="checkbox"/>

5. LEASE NM-19609	<div style="border: 2px solid black; padding: 5px;"> RECEIVED BY DEC 14 1983 O. C. D. ARTESIA, OFFICE </div>
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Holly "A" Federal	
9. WELL NO. 1	
10. FIELD OR WILDCAT NAME Brushy Draw <i>Delaware</i>	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 26, T-26-S R-29-3C	
12. COUNTY OR PARISH Eddy	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 2907. GR	

(NOTE: Report results of multiple completion zone change on Form 9-820)

RECEIVED
DEC 12 9 31 AM '83
BUR. OF LAND MGMT
ROSWELL DISTRICT

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.)*

12-3-83 Run 8-5/8" casing 68 joints total of 2832.02'. Cemented w/150 sx Class "C" 2% CaCl Plug down @ 8:45 AM 12-3-83. Cement set @ 2834.80'.

Subsurface Safety Valve: Manu. and Type Shaeffer 11" double ram 3000# Set @ 565 Ft.

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

SIGNED *Raymond* TITLE Production Secretary 12-4-83

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS DATE _____
CONDITIONS OF APPROVAL DEC 14 1983

ROSWELL, NEW MEXICO