

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 ☒ gas ☐
well well other

2. NAME OF OPERATOR

James L. Ludwick

3. ADDRESS OF OPERATOR

Box 70, Farmington, New Mexico 87499

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

AT SURFACE: 2310' FSL 330' FWL Sec. 18

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other)

SUBSEQUENT REPORT OF:

☒
☐
☐
☐
☐
☐
☐
☐
☐
☐

RECEIVED

MAY 14 1985

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

(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.)*

Ran 7" new, 24# surface casing set at 90 feet cemented with 40 cubic feet of class B cement - circulated 1 cubic foot. Pressure tested with 750 psi for 30 minutes - held okay.

Drilled 6 1/4" hole to 3375'. Ran 4 1/2" 10.5# casing set at 3375' cemented with 225 cubic feet class B cement tailed in with 125 cubic feet class B w/2%CaCl - circulated 3 cubic feet to surface.

Plug down @ 7:00 p.m. 4/26/85. Tested to 2500 psi for 30 minutes - held okay.

Waiting on completion unit.

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

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

SIGNED

AK Kendrick

TITLE

Agent

DATE

ACCEPTED FOR RECORD

(This space for Federal or State office use)

TITLE

MAY 21 1985

DATE

MAY 20 1985

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

BY

fl

*See Instructions on Reverse Side

NMOCC