

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 ☐ other ☐
well well
-
2. NAME OF OPERATOR
R.E. Lauritsen
-
3. ADDRESS OF OPERATOR
P.O. Box 2364, Farmington, New Mexico 87499
-
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 920' FNL & 795' FWL
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:

| | |
|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> |

(other) Change Operator

SUBSEQUENT REPORT OF

[illegible]

IT REPORT OF

RECEIVED

20 1983

MAY 20 1983

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

RECEIVED
MAY 26 1983

OIL CON. DIV.
DIST. 3

5. LEASE
NM 17009
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Gulf Federal -24
9. WELL NO.
#1
10. FIELD OR WILDCAT NAME
Wildcat Counselor Gallup Est.
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 24, T 23N, R 6W
12. COUNTY OR PARISH
Sandoval
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

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.)*

Please change Operator from R.E. Lauritsen to Lobo Production,
P.O. Box 2364, Farmington, New Mexico 87499.

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

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

SIGNED E. S. S. [Signature] TITLE Operator DATE 5-18-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

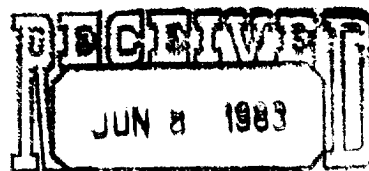
FOR RECORD

*See Instructions on Reverse Side

MAY 25 1983

ESSENCE

NMCC



OIL CONSERVATION DIVISION
SANTA FE