

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form Approved.  
Budget Bureau No. 42-R1424

**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  
Reeves Drilling & Petroleum Corp.  
3. ADDRESS OF OPERATOR  
2040 Camero Las Vegas, Nev 89123  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 525 Fr S Line and 725 fr West  
AT SURFACE: Line Sec 21 T25N R1E  
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:

☒ Spud In

5. LEASE  
NM 18590  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
D.D. & P.  
9. WELL NO.  
T.C. # One  
10. FIELD OR WILDCAT NAME  
Puerto Chiquito East Mancos  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 21 T25N R1E  
12. COUNTY OR PARISH  
Rio Arriba  
13. STATE  
New Mexico  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6945 Gr

(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.)\*

Moved Rig in Spudded Well June 30, 1983

RECEIVED

JUL 7 1983

OIL CON. DIV.

1983, 5

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Nelson A. Reeves TITLE Pres DATE July 6, 83  
Reeves Drilling & Petroleum Corp.

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

\*See Instructions on Reverse Side

NMOCC

JUL 14 1983

FARMINGTON DISTRICT

Smn