

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
SOUTHERN UNION EXPLORATION COMPANY

3. ADDRESS OF OPERATOR
P. O. BOX 2179 FARMINGTON, NM 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1800' ESL & 790' 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:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☒
☐
☐
☒
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☐
☐
☐

RECEIVED

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

AUG 06 1985

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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.)*

Pulled production tbg. Isolated casing leaks from 580'-15'.
Squeeze cemented w/150 sks (177 cu ft) Class B cement. Circ
1 bbl cement to bradenhead. Drilled out & pressure tested csg
to 1000 psi. Swabbed tested w/out flow. SWI to evaluate.
Operation Completed 7-29-85.

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AUG 09 1985

OIL CON. DIV

DISP. ?

Ft.

Subsurface Safety Valve: Manu. and Type

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

SIGNED [Signature] TITLE Div D & P Engineer DATE Aug. 2, 1985

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

AUG 07 1985

FARMINGTON RESOURCE AREA

BY [Signature]

*See Instructions on Reverse Side

NMOCC