

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  
HEN SAN INC Kenneth Hand, Marvin Lander
3. ADDRESS OF OPERATOR  
BOX 255 DEMING N.M. 88031
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
See 21 Twn 26N Rng 1E  
AT SURFACE:  
AT TOP PROD. INTERVAL: 1975' FSL & 485' FEL  
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:

- ☐  
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MAY 09 1984

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.)\*

RUN TUBING TAG T D 3123 RUN ~~25 SKS CEMENT~~ 25sks CEMENT 2% ccl  
PULLED TUBING TO 2850 MIXED 50sks GEL PULLED TUBING TO 1450  
MIX 20 sks CEMENT  
PULLED TUBING RUN 5 sks CEMENT TOP PLUG

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OIL CON. DIV.  
DIST. 3

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

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

SIGNED Jim Hand TITLE Rep DATE 5-3-84

(This space for Federal or State office use)

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

9/MOC D