

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, NEW MEXICO 87499
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 980' FNL & 1980' 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: SUBSEQUENT REPORT OF:

| | | |
|----------------------|--------------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | <input type="checkbox"/> |
| (other) | Spud & Set Surface Csg | |

RECEIVED

JAN 25 1984

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

BUREAU OF LAND MANAGEMENT
FARMINGTON DISTRICT OFFICE

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.)*

Spud 12 1/4" surface hole @ 1:15 a.m. 1-22-84. Drilled 12 1/4" hole to 316'.
Ran 7 jt 8 5/8", 32.0#, J-55 csg & set @ 316'. Cemented w/ 260 cu ft (220 sk)
Class B w/ 2% CaCl₂ & 1/4 lb/sk Celloflake. Circ. 12 bbl cement. Plug down @ 12:00 a.m.
on 1-22-84. WOC 12 hours. Pressure test casing & BOP to 1000 psi & held 15 min.
Drilled out w/ 7 7/8" production hole.

JAN 27 1984
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 [Signature] TITLE Drlg. & Prod. Supt. DATE January 23, 1984

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

JAN 26 1984

*See Instructions on Reverse Side

WMOCC

FOR DIVISION IN SOURCE AREA
BY [Signature]