

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 Co.
3. ADDRESS OF OPERATOR
- 314 N. Auburn Drawer "F", Farmington, NM
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
- AT SURFACE: 1010'FNL & 1070'FWL
- AT TOP PROD. INTERVAL: Same as above
- AT TOTAL DEPTH: Same as above
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\* Temporarily ☒  
 (other) \_\_\_\_\_

## SUBSEQUENT REPORT OF:

[illegible]

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

5. LEASE  
SF-078431
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Nickson
9. WELL NO.  
14
10. FIELD OR WILDCAT NAME  
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 23, T26N-R8W, N.M.P.M.
12. COUNTY OR PARISH | 13. STATE  
San Juan | New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6401' R.K.B.

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.)\*

SX proposes to temporarily abandon the referenced well for a period of 120 days. The well was originally completed in the Dakota then plugged back to the Chacra Zone where a completion attempt yielded water. The time will allow SX to determine if there are any other zone worth completing or if the well should be permanently abandoned.

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

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

SIGNED Michael L. Davis TITLE Division Mgr. DATE July 7, 1982

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY:

# APPROVED

JUL 15 1982

27 JAMES F. SIMS  
DISTRICT ENGINEER

**\*See Instructions on Reverse Side**

**NMOCC**