

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
Davis Drilling, Inc.

3. ADDRESS OF OPERATOR
P. O. Box 139, Great Bend, Kansas

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
660/N 7 2310/E
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
Jicarilla Apache #240

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
~~Boulder Marbles~~ Jicarilla Apache

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 26-28-1W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
KB 7151

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐ ☐

FRACTURE TREAT ☐ ☐

SHOOT OR ACIDIZE ☐ ☐

REPAIR WELL ☐ ☐

PULL OR ALTER CASING ☐ ☐

MULTIPLE COMPLETE ☐ ☐

CHANGE ZONES ☐ ☐

ABANDON* ☐ ☐

(other) Temp. Abd. X

(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.)*

Cleaned out. Tested. One Thousand mcf/day. Laid line to heater treater to produce gas for heater treater operation. Open hole below long string caved in. Hole bridged at base of long string. Gas shut off. It would be necessary to clean out before test is run. With no gas market, economics do not justify.

T. A. if well is not restored to productive capability by Jan 29, 1980 it will be necessary

This Approval Or Temporary Abandonment Expires January 29, 1982 to P&A.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE President DATE 1/26/81

(This space for Federal or State office use)

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

APPROVED

NMOCC

*See Instructions on Reverse Side

JAN 29 1981
James F. Sims
JAMES F. SIMS
DISTRICT OIL & GAS SUPERVISOR