

SUNDRY NOTICES AND REPORTS ON WELLS

1. oil well ☐ gas well ☒ other

AT TOTAL DEPTH: As above

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

[illegible]

APR 17 1960 (NOTE

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

U. S. GEOLOGICAL SURVEY
— 1963, 64.

RECEIVED

APR 19

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. H.

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.)*

4-12-80

MOL & RU Spudded 12-1/4" surface hole @ 2300 hrs.

4-13-80

Prep to cmt surface csg. Ran 3 jts (125') 8-5/8", 24#, K-55 ST&C
set @ 135' KB to surface. Woodco cmt w/ 100 sks Cl "B" w/ 1/4#
flocele/sk & 3% CaCl₂. Reversed out 7 bbls cmt. Plug down @ 0630
WOC 12 hrs. Pressure test to 600# for 30 min. OK.

4-14-80

Changed hole size from 12-1/4" to 7-7/8" @ 137'

Subsurface Safety Valve: Manu. and Type

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

SIGNED Vonna Pace TITLE Production Clerk

DATE _____

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ВМОССТ

***See Instructions on Reverse Side**

B'