TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*

(other) Spud & set

REPAIR WELL

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

Dec. 1973	
UNITED STATES	5. LÉASE
DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	NM 26357 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	8. FARM OR LEASE NAME Morton
1. oil gas X other	9. WELL NO.
2. NAME OF OPERATOR Robert L. Bayless	1 10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR P.O. Box 1541, Farmington, NM 87499	Basin Dakota 11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 1	7 AREA Sec. 23, T30N, R14W
AT SURFACE: 1750' FNL & 1030' FEL AT TOP PROD. INTERVAL: same	12. COUNTY OR PARISH 13. STATE San Juan NM
AT TOTAL DEPTH: same 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE	14. API NO.
REPORT, OR OTHER DATA	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	1033 T

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 well at 3:00 a.m. 2-20-83. Drilled 221' of $12\frac{1}{4}$ " surface hole. Ran 201' of 8-5/8" 24#/ft. J-55 casing. Landed casing at 221' RKB. Rigged up Woodco Cementers 2-20-83 Cemented surface hole with 105 sacks of Class B w/2% CaCl2. Good circulation throughout job. Circulated cement to the surface. WOC.

Drilling @ 1660 ft. Fresh water 2-21-83

2-22-83 Waiting on parts @ 2248 ft. Fresh water

surface casing

Subsurface Safety Valve: Manu. and Type _ 18. I hereby certify that the foregoing is true and correct Engineer DATE TITLE (This space for Federal or State office use) DATE APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

FEB 25 1009