

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

Stevens Operating Corporation

3. ADDRESS OF OPERATOR

P.O. Box 2203, Roswell, NM 88201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 660 FSL 1980 FEL Sec. 4

AT SURFACE: same
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: same

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* ☐

SUBSEQUENT REPORT OF:

(other) Spud & Casing

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.)*

4-19-84 Rig up and spud @ 5:30 PM, 4-18-84 with 12 1/4" bit.
4-20-84 Ran 18 jts. 8 5/8" x 24# casing set & cmnt. @ 762 w/300 sxs Haliburton Lite w/4% cc & 1/4# FC plus 200 sxs class "C" cmnt. w/2% cc plug DN @ 11:00 AM, 4-19-84, circ. 80 sxs. WOC 18 hrs. Pressure up 1000# for 30 min. logging. No pressure decrease.
4-27-84 Ran 109 jts. 4 1/2 11.60# CSG. Set & cmnt. @ 4455 w/470 sxs. "H" 50:50 POZ ± additives. Plug DN 9:00 AM, 4-27-84. WOC 18 hrs. Pressure up 1000# for 30 min. logging no pressure decrease.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED Peter W. Chester TITLE Prod. Controller DATE 5-1-84

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY
CONDITIONS OF

PETER W. CHESTER

TITLE

DATE

APPROVAL, IF ANY:
MAY 4 1984