Form Approved. Budget Bureau No. 42-R1424

ARTESIA, OFFICE

Drawer DD UNITED STATES DEPARTMENT OF THE INTERNORSIA, NA GEOLOGICAL SURVEY

	NM-0.225	584		
6.	IF INDIAN,	ALLOTTEE	OR	TRIBE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Sun Federal

LLASE		
NM-022584		

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.)

gas well 🛚 other well

2. NAME OF OPERATOR

Stevens Operating Corporation

3. ADDRESS OF OPERATOR

P. O. Box 2203, Roswell, New Mexico

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 990' FSL, 330' FEL, Sec. 29-7S-26E

AT TOP PROD. INTERVAL: AT TOTAL DEPTH:

Same

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

10. FIELD OR WILDCAT NAME Undesignated Pecos San 11. SEC., T., R., M., OR BLK. AND SURVEY OR

Sec. 29-7S-26E

12. COUNTY OR PARISH 13. STATE Chaves

14. API NO.

9. WELL NO.

AREA

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES**

ABANDON* Change of Ownership

(other)

SUBSEQUENT REPORT OF:

port results of multiple completion or zone ange on Form 9–330.)

Off & GAS U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO

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.)*

The ownership of the above named well was changed from H. E. Prince to Stevens Oil Company by an Assignment dated August 14, 1981. Stevens Operating Corporation holds the operating rights by a Designation of Operator from Sun Oil Company dated September 1, 1981, a copy of which is already on file with you.

Subsurface Safety Valve: Manu. and Type ___

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

Thom how

TITLE Production Coordinater 1-21-82

_ DATE .

APPROVED (This space for Federal or State office use) APPROVED BY SELD PETER W. CHESTER TILE

CONDITIONS OF APPROVAL, IF ANY:

FEB 9 1982

FOR

JAMES A. GILLHAM •See Instructions on Reverse Side DISTRICT SUPERVISOR

OIL CONSERVATION DIVISION

DISTRICT OFFICE

Drawer DD

Artesia, MM

#2

	Sept. thru Dec. 1981 NO
	SUPPLEMENT TO THE OIL PRORATION SCHEDULE
DATE	October 28, 1981
PURPOSE_	ALLOWABLE REVISION
	Effective October 1, 1981 the allowable of the following
	Stevens Operating Corporation well in the pool listed
	below is hereby revised as indicated.
	Pecos San Andres Sun Federal #1-P-29-7-26, increased to 2 barrels of oil per day Oct. Total - 62 bbls. Nov. Total - 60 bbls. Dec. Total - 62 bbls.
	WAG: ma
	Stevens Operating Corporation
	NCO
	OIL CONSERVATION DIVISION
	man day of the state of the sta
	DISTRICT SUPERVISOR

Form Maroved. Bud Burgari No. 42-R1424

. LEASE NM-022584

DEPARTMENT OF THE TIME INTO	NH 022304
GEOLOGICAL SURVEY OIL & GAS	6. IF INDIAN, ALLOTTEE OR TRIBONAMEC
U.S. GEOLOGICAL SURVE	
SUNDRY NOTICES AND REPORTS ON WELLS ICO	
(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
1. oil gas .	Sun Federal
well well other	9. WELL NO.
2. NAME OF OPERATOR Stevens Operating Corporation /	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Undesignated Pecas Sant
P. O. Box 2203, Roswell, NM 88201	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec. 29-7S-26E
below.) AT SURFACE: 990' S, 330' E, Sec. 29-7S-26E	
AT TOP PROD. INTERVAL: same	Chaves New Mexico
AT TOTAL DEPTH: Same	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	
CHANGE ZONES	
(other)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertined 9-16-81 Ran 32 joints 2 3/8" tubing	nt to this work.)* g, set packer at 1049'.
Acidize in 2000 gal. pad st Good flowback. Pulled pack 34 joints 2 3/8", set at 11	
9-29-81 Produced 2 BO, 2 BW, gas TS pressure 10#, casing pressure	
·	
Subsurface Safety Valve: Manu. and Type	Set @ rt.
18. I hereby certify that the foregoing is true and correct	
SIGNED TITLE President	DATE10-26-81
(This space for Federal or State o	ffice use)
APPROVED BY OCT O AGOA	DATE
CONDITIONS OF APPROVAL, ISONY:	
U.S. GEOLOGIC A SHRYEY	
POSWELL DAM AND STATE SEE Instructions on Reverse	Side