MM AIL CONS. COMMISSION Dr er DD

Form '9-331 Dec. 1973

Artesia, NM 88210

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Form Approved. Budget Bureau No. 42-R1424

UNITED STATES								
DEPARTMENT OF THE INTERIOR								
GFOLOGICAL SURVEY								

MAY	15.1 L 1982
107	NM 14129
_ d	6. ININDIAN, ALLOTTEE OR TRIBE NAME

GEO	LOGICAL SURVEY		C. DINDIAN, ALLOTTEE	OK IKIBLIYAML
SUNDRY NOTICE	S AND REPOR		7. UNIT AGREEMENT N	AME
Do not use this form for proposeservoir. Use Form 9-331-C for	sals to drill or to deepen	or plug back to a different	8. FARM OR LEASE NAM	F
			Denton-Federal	
1. oil gas XX	other		9. WELL NO.	
2. NAME OF OPERATOR Harper Oil	Company		10. FIELD OR WILDCAYN	AMF
			Wildcat Mi	
3. ADDRESS OF OPERAT 904 Hightower,	Okla. City,		11. SEC., T., R., M., OR E	LK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION C	CLEARLY. See space 17	24-5S-27 <u>E</u>	
below.) AT SURFACE: 990'	FSL & 890'	FWL Sec. 24-	12. COUNTY OR PARISH	13. STATE
AT TOP PROD. INTER		5S-27E	Chaves	New Mexico
	Same		14. API NO.	
16. CHECK APPROPRIATE		NATURE OF NOTICE,		
REPORT, OR OTHER	DATA		15. ELEVATIONS (SHOW 4212.2 KB	DF, KDB, AND WD)
REQUEST FOR APPROVAL	TO: SUBSEQ	UENT REPORT OF:	4212.2 RB	
TEST WATER SHUT-OFF				
FRACTURE TREAT	님	जाजाहाता व	TENOMERATION	
SHOOT OR ACIDIZE REPAIR WELL	H		(NOTE: Report results of m	ultiple completion or zone
PULL OR ALTER CASING			change on Form 9-	-330.)
MULTIPLE COMPLETE		D YAM 拟L 目	d 1982 (d.)	
CHANGE ZONES ABANDON*		H ()		
(other)			NOAS BICAL SUSVEY	
measured and true ve	ate of starting any prortical depths for all ma	PERATIONS (Clearly state oposed work. If well is darkers and zones pertinen	e all pertinent details, and irectionally drilled, give sult to this work.)*	Jarrace locations and
sand o	PN" blanking on top of pac 41 holes.	plug in WB packer. Perfora	cker @ 6850'. te ABO 5240'-54	Spot 2 sks 80'.
4-7-82 Acidiz	ze ABO w/4000	O gals. acid		
		Abo down casin	g.	
48,50	00# 20/40 & 1	12,500# 12/20	10,000 gals. C sand.	_
5-1-82 Abo zo	one is non-pr	roductive. Re	trieved "PN" bl	anking plug.
Will p	produce Stra	wn zone 6946'-	6980'.	
Subsurface Safety Valve: N	Manu. and Type		Se	t @ Ft.
18. I hereby certify that th				
SIGNED AMMY	got h -	TITLE Production	Manager 5-3-	-82
ACCEPTED FOR RECO	UKU !	space for Federal or State of		
APPROVED BY		TITLE	DATE	
CONDITIONS OF APPROVAL	IF ANY:			
MAY 1 0 1982	200			
U.S. GEOLOGICAL S	DOKAT 1	See Instructions on Reverse	Side	
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	William Parks		
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	W. F. Martin (M. F. L. 1989)		
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