

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NM OIL CONS. COMMISSION

Form Approved.
Budget Bureau No. 42-R1424

Drawer 5. LEASE

Artesia, NM 8827634

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED BY

MAR 26 1984

O. C. D.

ARTESIA, OFFICE

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 2408, Roswell, NM 88201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 990 FNL 1980 FEL Sec.14,T7S,R26E

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hanagan Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 14, T-7-S, R-26-E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

14. API NO.

30-005-61041

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

3987.50 GR

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

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

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(other) Open pit, add additional perfs.

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

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.)*

Propose to set RBP @ \pm 4280'

Perforate Abo sand @ 4243-4252 w/30 holes. Acidize and test for gas and frac as needed, pull RBP out of well and put back on production.

Propose to open pit to flow back well.

Subsurface Safety Valve: Manu. and Type

Set @

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

SIGNED [Signature] TITLE Production Controller DATE 2/27/84

APPROVED

(This space for Federal or State office use)

APPROVED BY [Signature] W. CHESTER TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

MAR 22 1984