

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
JACK GRYNBERG AND ASSOCIATES

3. ADDRESS OF OPERATOR
1050 17th Street, Suite 1950, Denver, CO 80265

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FNL & 1980' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input checked="" type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>

(other) _____

5. LEASE
USA-NM-11592

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
N/A

7. UNIT AGREEMENT NAME
N/A

8. FARM OR LEASE NAME
Grynberg 29 Federal JAN 2 1982

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Undesignated ABO

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 29, T 5 S - R 24 E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

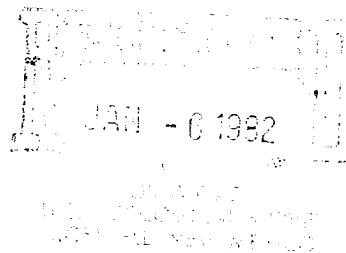
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4101.1 GR

(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.)*

12/23/81 Ran 4 1/2" casing to 4177'. 10 1/2# K55, cmt. with 1900 sxs 5050 POZ, 2/C, 6 lbs. salt, 2% gel, 3/10 Halid 4 3/10 CFRE. Top of cmt. 901'. No



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Morris Ettlinger TITLE EXPLORATION MANAGER DATE 1/4/82

ACCEPTED FOR RECORD (This space for Federal or State office use)
APPROVED BY ROGER A. CHAPMAN TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

JAN 7 1981

U.S. GEOLOGICAL SURVEY*See Instructions on Reverse Side
ROSWELL, NEW MEXICO