

RECEIVED

NM OIL GASES. COMMISSION

Drawer DD

Artesia, NM 88210

Form 9-331
Dec. 1973Form Approved:
Budget Bureau No. 42-R1424

JUN 7 1982 UNITED STATES

DEPARTMENT OF THE INTERIOR

O. C. D. GEOLOGICAL SURVEY

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 ☒ gas ☐
well well other

2. NAME OF OPERATOR

Berge Exploration, Inc. ✓

3. ADDRESS OF OPERATOR

7100 N. Broadway, 2-L, Denver, CO 80221

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

AT SURFACE: 330' FWL X 2970' FSL

AT TOP PROD. INTERVAL: (as above)

AT TOTAL DEPTH: (as above)

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* ☐

(other)

production casing

SUBSEQUENT REPORT OF:

☐☐☐☐☐☐☐☐5. LEASE
NM-43714

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Date Federal

9. WELL NO.

No. 1 Worley-Fed.

10. FIELD OR WILDCAT NAME

Leslie Spring, San Andres

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

Sec. 25, T7S, R26E

12. COUNTY OR PARISH 13. STATE

Chaves

New Mexico

14. API NO.

15. ELEVATIONS (SHOW OF, KDB, AND WD)
3856.4 GL

(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.)*

Ran 44½ joints 10.5# 4½", J55 csg. to 1861 ft. Cemented with 225 sax class C, 2% calcium chloride plug down @ 6:55 a.m., 5/26/82.

RECEIVED
JUN 3 1982

Subsurface Safety Valve: Manu. and Type

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

Set @ _____ Ft.

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

SIGNED

Verne P. Berry

TITLE

V.P.

DATE

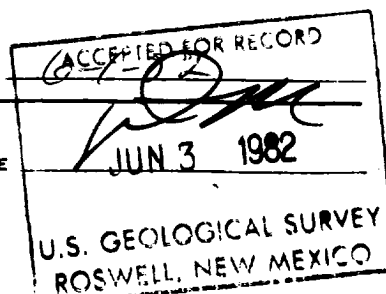
(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side