Form 9-331 NM UIL CONS. COMMIS Dec. 1973 Drawer LD	SSION Form Approved. Budget Bureau No. 42–R1424		
UNK STATES Artesia, NM 88210			
DEPARTMENT OF THE INTERIOR	LC 067	'811-A	
C/SF GEOLOGICAL SURVEY	6. IF INDIAN, A	ALLOTTEE OR	TRIBRECERVED
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGRE	EMENT NAME	
(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.)			APR 3 0 1982
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR L		
1. oil gas 🔀 other	<u></u>	<u>'ederal</u>	ARTESIA, OFFICE
2. NAME OF OPERATOR		2	
Berge Exploration, Inc.	10. FIELD OR W		E = :
3. ADDRESS OF OPERATOR Denver,	Undesi	gnated	ABO
7100 N. Broadway, Ste.2-L, CO 80221	11. SEC., T., R.	, M., OR BLK.	AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec 2	7 7.75	, R.26E
below.) AT SURFACE: 660' FNL & 660' FWL			
AT SURFACE: OOU FNL & OOU FWL AT TOP PROD. INTERVAL:	12. COUNTY OF Chaves		ew Mexico
AT TOTAL DEPTH:	14. API NO.		EW HEATCO
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	<b>11</b> . All <b>110</b> .		
REPORT, OR OTHER DATA	15. ELEVATION	IS (SHOW DF	, KDB, AND WD)
		′6 <b>1'</b> ′G.L	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF			
SHOOT OR ACIDIZE			에 가격하는 것이다. 같이 가격하는 것이다.
REPAIR WELL			le completion or zone
PULL OR ALTER CASING	change	on Form 9–330.	
		1 2 2 2	
ABANDON*			
(other) Set FIGUELION Casing			
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is divided to the starting and proposed work.	rectionally drilled	tails, and giv I, give subsur	e pertinent dates, face locations and
measured and true vertical depths for all markers and zones pertinent	t to this work.)*	č	
Ran 116 jts 4½" 10.5# J-55 8rd casing	(4775').	Set @	4775'.
Cemented w/500 sx 50/50 POZ. Bumped p	olug @ 9:4	5 AM on	4-11-82
w/300 psi, held okay.			
	WS FR		
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」 Like APR 1c1	1982 7日		
ξιαμική κ.γ. -	لمحص		
OB & GE Transford Contents	AS 11 1 19272		
Subsurface Safety Valve: Manu. and Type	1	Setre	Ft.
	ACCEPTED	FOR REC.	
18. Thereby certify that the foregoing is true and correct		el.	3. 1982
SIGNED ABURANE Stemate TITLE Agent	DAT	April 1	5, 1902
(This space for Federal or State offi	ice use) APR	RA BOL	
			IRVEY
APPROVED BY TITLE TITLE	THE GEOL	COLUM	YICO
	ROSWELL	NEW ME	
	A STATE OF		
		· 5.5	••• ••••

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\*See Instructions on Reverse Side

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