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1.

Form 9–331 Dec. 1973	Form Approved. Budget Bureau No. 42–R1424
UNITED STATES MAR 3 0 1982	5. LEASE
DEPARTMENT OF THE INTERIOR	USA-NM-11795
CISE GEOLOGICAL SURVEY O. C. D.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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	7. UNIT AGREEMENT NAME N/A
(Do not use this form for proposals to drift or to deepen of plog back to a drift of the reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
	Hobbs Canyon Federal
1. oil gas well XXX other	9. WELL NO.
2. NAME OF OPERATOR	3
Jack Grynberg and Associates	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Pecos Slope Abo Gas
1050 17th Street, Suite 1950, Denver, CO 80265	11. SEC., T., T., M , OP BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec. 12, T 6 S - R 24 E
AT SURFACE: 1980' FSL & 660' FWL of Sec. 12 AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Chaves NM
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 4017.0' GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF I FRACTURE TREAT I SHOOT OR ACIDIZE I REPAIR WELL I	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
PULL OR ALTER CASING	

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.)*

3/25/82 Ran 95 jts 10.5# J-55 4 1/2" csg. set @4024'. Ran 500 gals of mud flush ahead of 2000 sxs 5050 POZ, 2% gel, 6# salt, 3/10ths of 1% Halid 4, 3/10ths of 1% CFR2. Top of cmt @908'.

Subsurface Safety Valve: Manu. and Type		Set @	Ft.
18. I hereby certify that the foregoing is true and correct			
	DATE _	3/26/82	
(This space for Federal or State office use))		
APPROVED BY TITLE	DATE		

*See Instructions on Reverse Side