

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 complete a well. Use Form 9-321-C for such purposes.)

1. oil well ☒ gas well ☐ other ☐ *UL*
2. NAME OF OPERATOR
Robert N. Enfield
3. ADDRESS OF OPERATOR
P.O. Box 2431, Santa Fe, NM 87501
4. LOCATION OF WELL (a. REPORT LOCATION OF ARLY, one space (7 below.)
AT SURFACE: 1980' FSL & 1980' FWL of Sec. 26
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE TYPE OF 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)

SUBSEQUENT REPORT OF: ☒

5. H.A.
NM-15876
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Federal "26"
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Wildcat
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 26, 19S, R29E
12. COUNTY OR PARISH
Chaves
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
4009.6 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.)*

Total Depth was reached July 4, 1982 @ 7070'
The well was determined to be a dry hole

Plugging Operations:

- Plug No. 1 35 sx Class "C" cement from 1810' - 1910' calculated 100'
Plug No. 2 35 sx Class "C" cement from 1246' - 1346' calculated 100'
Plug No. 3 35 sx Class "C" cement from 786' - 886' calculated 100'
Plug No. 4 25 sx Class "C" cement from 330' - 430' calculated 100'
10 sx cement on top of 8-5/8" casing.

The Western Co. used a total of 140 sx Class "C" cement with 2% CACL2 (1.32 cu. ft./sx yield, 14.8#/gal weight)

Released rig at 1:00 AM July 5, 1982.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

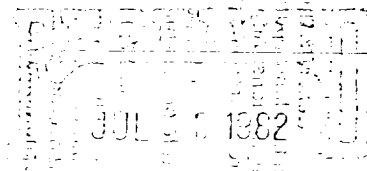
18. I hereby certify that the foregoing is true and correct

SIGNED *Robert N. Enfield* Operator
Robert N. Enfield

DATE 7/12/82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side

dSF

Posted 7-30-82
P+H

Fed. Surf.