

C15F

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

5. LEASE
NM-16803-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal "35"

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Wildcat *Quilley*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 35, T9S, R29E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3961 GR

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O.C.D.

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 well gas well other

2. NAME OF OPERATOR
Robert N. Enfield

3. ADDRESS OF OPERATOR
P.O. Box 2431, Santa Fe, NM 87501

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE 1307' FNL & 1651' FEL of Sec. 35
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 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) <i>Drilling Report</i> | | | <input checked="" type="checkbox"/> |

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Oil & Gas
MINERALS DEPT. SERVICE
ROSWELL, NEW MEXICO

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.)*

Spudded: 12-1/4" hole at 9:00 PM September 29, 1982

Casing: Drilled to a depth of 390'
Ran 9 jts 8-5/8", 24#/ft, J-55 ST&C casing set at 380.56'
on September 30, 1982

Cement: Cemented with 250 sacks Halliburton Class "C" cement.
Plug down at 8:00 AM September 30, 1982. WOC 18 hrs.
Started drilling out at 1:30 AM October 1, 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 DATE 10/13/82

ACCEPTED FOR RECORD
(ORIG. SGD.) DAVID R. GLASS
(This space for Federal or State office use)

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

OCT 19 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side