

C/87

Form 9-331  
 Dec. 1973

Form Approved.  
 Budget Bureau No. 42-R1424

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 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  
 Stevens Operating Corporation

3. ADDRESS OF OPERATOR  
 P. O. Box 2203, Roswell, New Mexico 88201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
 AT SURFACE: 1780 FNL 1980 FEL Sec. 9, T7S, R26E  
 AT TOP PROD. INTERVAL: Same  
 AT TOTAL DEPTH: Same

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) Spud Well	<input type="checkbox"/>		<input type="checkbox"/>

5. LEASE NM 38342	RECEIVED BY
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	JAN 10 1984
7. UNIT AGREEMENT NAME	O. C. D.
8. FARM OR LEASE NAME Helen Collins Federal	ARTESIA, OFFICE
9. WELL NO. 5	
10. FIELD OR WILDCAT NAME Pecos Slope Abo	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 9, T-7-S, R-26-E	
12. COUNTY OR PARISH Chaves	13. STATE NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 3671 GR	

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

RECEIVED  
 JAN 6 11 29 AM '84  
 BUREAU OF OIL AND GAS  
 ROSWELL DISTRICT

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.)\*

12-30-83 Built pad & pits, spud @ 10:00 a.m., drilled 15'

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Dave Thompson TITLE Production Controller DATE 1-5-84

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

RECEIVED  
 JAN 6 1984