

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  
Topat Oil Corporation

3. ADDRESS OF OPERATOR 79701  
505 N. Big Spring - Ste. 204 - Midland, TX

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE:  
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 ☐ ☐  
FRACTURE TREAT ☐ ☐  
SHOOT OR ACIDIZE ☐ ☐  
REPAIR WELL ☐ ☐  
PULL OR ALTER CASING ☐ ☐  
MULTIPLE COMPLETE ☐ ☐  
CHANGE ZONES ☐ ☐  
ABANDON\* ☐ ☐  
(other) Approval for disposal of produced water

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.)\*

1. The produced water from the Patricia Federal is hauled by Jim's Water Service of Colorado, Inc. and disposed in Solt SWD, Permit # SWD318 at Unit L, Sec 5, T18S, R28E, Eddy County, New Mexico.

5. LEASE

NMNM58803

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

RECEIVED

8. FARM OR LEASE NAME

Patricia Federal

FEB 13 1993

9. WELL NO.

#1 - Tank Battery

O. C. D.

10. FIELD OR WILDCAT NAME

Coyote

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

NWSE Sec. 20, T11S, R27E

12. COUNTY OR PARISH

Chaves

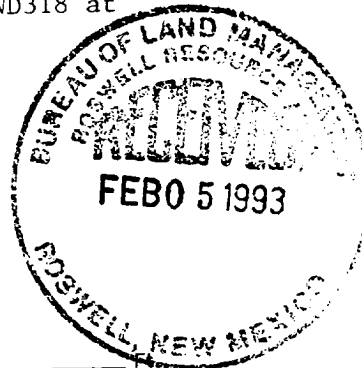
13. STATE

New Mexico

14. API NO.

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

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



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

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

SIGNED [Signature] TITLE President DATE 2-1-93

(This space for Federal or State office use)

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

