

UNITED STATES HOBBS, NEW MEXICO 88240  
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  
M & W OF LOVINGTON, INC  
3. ADDRESS OF OPERATOR  
P O BOX 922, LOVINGTON, NM 88260  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FNL @ 1980 FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, 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:

- ☐  
☐  
☒  
☐  
☐  
☒ within same pool  
☐

(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.)\*

1. Set CIBP @ 9460' with 35' of cement on plug.
2. Perf 9302 to 9306' to 9340' with 2 jet shts. per, ft.
3. Acidize Perfs with 2000 gal. NEFE Hal Acid with Rock Salt blocking agent.
4. Swab test well with no fluid recovery.
5. Small amount of gas.
6. Install gas compressor & return to prod.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

*Peter W. Chester*

TITLE President

DATE

10/1/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

5. LEASE

NM03431

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

LAS CRUCES "B"

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

ALLISON - Penn

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

S- 30, T-8S, R 37E, NMPM

12. COUNTY OR PARISH

ROOSEVELT

13. STATE

NM

14. API NO.

30-041

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

4048 GL

