Form 9-331 Dec. 1973

Drawer Artesia, NM

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a. NM	88210

5. LEASE

Form Approved.

Budget Bureau No. 42-R1424

UNITED STATES DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY								
SUNDRY	NOTICES	AND	REPORT	rs c	N	WELLS		
not use this fo	rm for proposals	to drill	or to deepen	or plug	back	c to a differ	ent	

(Do not use this form for proposals to drill or to reservoir. Use Form 9-331-C for such proposals.) gas well 🗓 other well 2. NAME OF OPERATOR CHAVEROO OPERATING COMPANY, INC. 3. ADDRESS OF OPERATOR P.O. DRAWER 1599, LOVINGTON, NEW MEXICO 88260 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17

660'FNL & 1980'FEL OF SEC. 28 AT SURFACE:

AT TOP PROD. INTERVAL: AT TOTAL DEPTH:

SHOOT OR ACIDIZE REPAIR WELL

CHANGE ZONES ABANDON*

(other)

PULL OR ALTER CASING MULTIPLE COMPLETE

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

CHANGE

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT

OF OPERATOR

SUBSEQUENT REPORT OF:

6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME FARRELL FEDERAL 9. WELL NO. 15 10. FIELD OR WILDCAT NAME CHAVEROO SAN ANDRES 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC.28, T.7 S., R.33 E.

NM-0108997-B

12. COUNTY OR PARISH 13. STATE NEW MEXICO ROOSEVELT 14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) 4414



DIL & GAS

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 drill and true vertical deaths for all markers and zones pertinent to this work.)* measured and true vertical depths for all markers and zones pertinent to this work.)*

THIS IS NOTICE OF CHANGE OF OPERATOR OF ABOVE DESCRIBED WELL

FROM: JOE E. BROWN P. O. BOX 543

LOVINGTON, NEW MEXICO 88260

T0: CHAVEROO OPERATING COMPANY, INC.

P. O. DRAWER 1599

LOVINGTON, NEW MEXICO 88260

Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. hereby certify that the foregoing is true and correct SIGNED ATT IN TO RECORD TO THE AGENT	DEC 22 1983
APPROVED (This space for Federal or State office	e use)
CONDITIONS OF APPROVAL, IF ANY:	DATE

ULU 23 1983

DEC NY 1085

RECEIVED

OFC 28 1983

HORSE CARICE