

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  
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 below.)  
AT SURFACE: 1980'FNL & 660'FEL OF SEC. 28  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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

5. LEASE  
NM-0108997-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
FARRELL FEDERAL

9. WELL NO.  
11

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.

12. COUNTY OR PARISH | 13. STATE  
ROOSEVELT | NEW MEXICO

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
4412

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) <input type="checkbox"/>	CHANGE OF OPERATOR <input type="checkbox"/>

**RECEIVED**  
DEC 23 1983  
OIL & GAS  
BUREAU OF LAND MANAGEMENT  
NEW MEXICO

(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.)\*

THIS IS NOTICE OF CHANGE OF OPERATOR OF ABOVE DESCRIBED WELL

FROM: JOE E. BROWN  
P. O. BOX 543  
LOVINGTON, NEW MEXICO 88260

TO: CHAVEROO OPERATING COMPANY, INC.  
P. O. DRAWER 1599  
LOVINGTON, NEW MEXICO 88260

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

18. I hereby certify that the foregoing is true and correct  
SIGNED Arthur E. Brown TITLE Agent DATE DEC 22 1983

APPROVED \_\_\_\_\_ (This space for Federal or State office use)

APPROVED PETER W. CHESTER TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY

DEC 23 1983



RECEIVED BY  
DEC 27 1983  
O. O. D.  
ARTESIA CENTER

RECEIVED  
DEC 28 1983  
F. O. O.  
HOURS OFFICE