M. OIL CONS. COMMISSION Combox 1980	Form Approved. Budget Bureau No. 42–R1424
OBBS, NEW MEXICO 888449ED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	Federal NM 0108997
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	7. UNIT AGREEMENT NAME
	8. FARM OR LEASE NAME Farrell Federal
well well other Injection Well	9. WELL NO. 4
2. NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
Champlin Petroleum Company	
	Chaveroo (San Andres) 11. sec., T., R., M., OR BLK. AND SURVEY OF
P. O. Box 7946, Midland, TX 79708 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.)	Sec. 30, T-7-S, R-33-E
AT SURFACE: 660' FS&EL AT TOP PROD. INTERVAL: Same	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH: Same	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD
	10. ELEVATIONS (SHOW DF, KDB, AND WD,
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF	
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING $\Box$ $\Box$ $U_{\mathcal{E}}\mathcal{C}$	100 Change on Form 9-330.)
	1985
	j.
ABANDON* L LĂ	. S /
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat	e all pertinent details, and give pertinent dates
including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertinent	irectionally drilled, give subsurface locations and
<ol> <li>MIRU DD unit.</li> <li>Set CIBP @ 4100' &amp; cap w/4 sx (52') Class "</li> <li>Displace casing w/10#/gal drlg. mud.</li> <li>Cut off 4-1/2" csg @ 907'. POH w/casing.</li> </ol>	C" Cmt. TOC 4048'.
<ul><li>5. Spot 40 sx cement plug from 957-857'.</li><li>6. Spot 40 sx cement plug from 371-240' (tagge</li></ul>	4)
7. Circulate 25 sx cement plug from 62' to sur	u). face
8. Weld on cap and install dry hole marker.	
Subsurface Safety Valve: Manu. and Type	Set @ Ft
18. I hereby certify that the foregoing is true and correct SIGNED words W. Tally f., TITLE Sr. Engineer	DATE 12/2/85
(This space for Federal or State off	
APPROVED BY TITLE TITLE TITLE TITLE Approved as to plugging of the well b	OTE DATE APPROVED
CONDITIONS OF APPROVAL, IF ANY:	PEIEK W. CHESTER
Approved as to Flugging 0: the until Liability under bond is retained until Liability under bond is completed.	FED 9 1007
Liability under bond is retuined, surface restoration is completed,	FEB 2 1987
*See Instructions on Reverse S	
	ROSWELL RESOURCE AREA

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