

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 ☒ Injection Well
2. NAME OF OPERATOR  
Champlin Petroleum Company
3. ADDRESS OF OPERATOR  
P. O. Box 7946, Midland, TX 79708
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FSL & 660' FEL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | 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 checked="" type="checkbox"/> |                       | <input type="checkbox"/> |
| (other)                  |                                     |                       |                          |

5. LEASE  
Federal NM 0108997
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Farrell-Federal
9. WELL NO.  
4
10. FIELD OR WILDCAT NAME  
Chaveroo (San Andres)
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 30, T7S, R33E
12. COUNTY OR PARISH  
Roosevelt
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.)

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.)\*

Uneconomical for injection.

Proposed plugging procedure.

Set CIBP @ 4100± and cap w/50' cmt. Determine 4-1/2" casing freepoint (est-1674') and cut csg at free point. Set 100' cmt plug centered at top of 4-1/2" csg stub. Set 100' cmt plug across surface casing shoe @ 371'. Set ~~10~~ ~~50~~ plug in top of surface pipe with marker installed. Fluid between plugs to be 10#/gal mud.

Estimated Date: May 1985

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

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

SIGNED Donald W. Tally, Jr. TITLE Sr. Engineer DATE 4/19/85

(This space for Federal or State office use)

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

APPROVED  
PETER W. CHESTER

APR 29 1985

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA