

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

EL RAN, INC.

3. ADDRESS OF OPERATOR

P. O. BOX 911, LUBBOCK, TX 79408

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 660' FSL & 1980' FWL

AT TOP PROD. INTERVAL:

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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) Conversion to Pressure

Maintenance Injection Well

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.)*

11/5/82 Ran 134 jts. 2 3/8", 4.6# Plastic Coated Tubing with Plastic Coated Watson Tension Packer. Loaded annulus with inert packer fluid and pressured CSG to 1000# PSI. Held 30 min. with no leak off. Packer set at 4131.4 KB. Started injection on 11/15/82.

5. LEASE NM 18846
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME U. S.
9. WELL NO. 1
10. FIELD OR WILDCAT NAME Chaveroo
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34, T7S, R32E
12. COUNTY OR PARISH Roosevelt
13. STATE New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD) 4493.5 GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

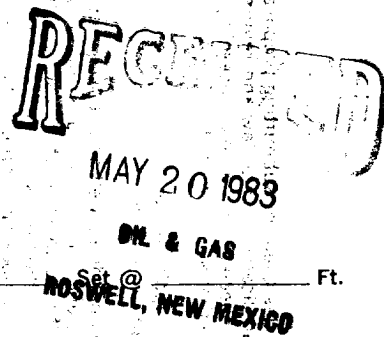
Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Robert R. Ranch TITLE Vice-President DATE May 19, 1983

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:



RECEIVED
SEP 14 1983
C. C. D.
FRIEDMAN

RECEIVED
SEP 15 1983
HON. O.C.D.