Form 9-331 Dec. 1973

Form Approved. Budget Bureau No. 42-R1424

5. LEASE

NM 15332

## P. O. BOX 1080 UNITED STATESOBBS, NEW MEXICO 88240

## DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill cr to deepen or plug back to a different reservoir, Use Form 9–331–C for such proposals.)	7. JNIT AGREEMENT NAME
The state of the s	8. FARM OR LEASE NAME
1. oil ☐ gas ☐ other Dry Hole	Federal /B
2. NAME OF OPERATOR	9. WELL NO.
Bliss Petroleum, Inc.	10 10 10 10 10 10 10 10 10 10 10 10 10 1
3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Undesignated
Box 1817, Hobbs, N.M. 88240	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	<ol> <li>SEC., T., R., M., OR BLK. AND SURVEY CR AREA</li> </ol>
below.)	Sec. 31, T85, R38E
AT SURFACE: 660' FW & FNL, of Sec. 31	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	Roosevelt NM
	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3995' RKB
TEST WATER SHUT-OFF	
FRACTURE TREAT	a caccecaca
SHOOT OR ACIDIZE	315/23/(W/F3)))
REPAIR WELL	(NOTE: Report results of multiple completion or zone
MULTIPLE COMPLETE	JUL 2 1982 / 330.)
CHANGE ZONES	1302 25
ABANDON*	OIL & GAS
(other)	GEOLOGICAL SUPVEY
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is directly measured and true vertical depths for all markers and zones pertinent	rectionally drilled, give subsurface locations and to this work.)*
1. Set 5 1/2" CIBP at 8507' Spotted 35' Cmt	· on how of DD
of the sported 35 sx. cmf in the	at 7390' Toggod TOG 70(0)
4. Spotted thru tbg. 35 sx. cmt. plug at 5475' - 5355'.  5. Spotted thru tbg. 60 sx. cmt. plug at 4247'. Tagged top of cmt. inside	
8.5/8' at $4140$ '.	'. Tagged top of cmt. inside
9 3/0 at 4140.	
	8 5/8" at 2100' - 1978'.
	8 5/8" from 50' to surface.
8. Cut off well head. Installed dry hole mar	ker. Work completed 6-23-82.
Subsurface Safety Valve: Manu. and Type	Set @
18. I hereby certify that the foregoing is true and correct	
The recty certain that the foregoing is true and correct	0.00
SIGNED Gul Blis TITLE President  APPROVED (This space for Federal or State office)	DATE 6-29-82
APPROVED (This spade for Federal or State office	P.1.CA)
CONDITIONS OF APPROVAL IF ANY	DATE
NOV 4 1982	
FOR	
JAMES A. GILLHAM	

DISTRICT SUPERVISORSee Instructions on Reverse Side