1. oil

well

below.)

X

2. NAME OF OPERATOR

AT TOTAL DEPTH:

gas

Stringer Oil & Gas

AT TOP PROD. INTERVAL:

REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE

CHANGE ZONES ABANDON*

(other)

well.

San Antonio, Texas 78209

NW OTH COME Drawer DD

Form Approved. Budget Bureau No. 42-R1424

UNITED STATES rtesia, NM 88210

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.)

other

3. ADDRESS OF OPERATOR 8700 Crownhill Blvd., #403

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

AT SURFACE: 1980' FSL & 1980' FWL of Sec. 21

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,

Running & cementing of production casing.

٥.	LEASE
	NM-0117529
6.	IF INDIAN, ALLOTTEE OR TRIBE NAME
	N/A
7.	UNIT AGREEMENT NAME
	N/A

N/A	
8. FARM OR LEASE NAME	AUC 1 5 1003
Federal "21"	AUG 1 5 1983

9. WELL NO. O. C. D.

10. FIELD OR WILDCAT NAME ARTESIA, OFFICE Chaveroo San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 21, T7S, R33E 12. COUNTY OR PARISH 13. STATE Roosevelt New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) GR. 4406.7

(NOTE: R MAY 1 9 10R3

DIL & GAS

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, and true vertical depths for all markers and zones pertinent to this work.)*

SUBSEQUENT REPORT OF:

TD 7 7/8" hole @ 4456'. On 5-5-83 ran 114 jnts of $4\frac{1}{2}$ ", 10.50#, J55 casing; set @ 4372.57'. Set a Halliburton Float Collar @ 4374.32'. Ran 1 jnt of $4\frac{1}{2}$ ', 10.50#, J55 casing; set @ 4412.75'. Set a Halliburton Float Shoe @ 4414.00'. Centralizers @ 4393'; 4330'; 4250'; 4170'; 4090'. Circulated 30 minutes. Cemented with 300 sacks of Class "C", 50/50 POZ, 6# salt/sack. PD @ 12:32am, 5-5-83. Logged top of cement @ 3514'.

Subsurface Safety Valve: Manu. a	nd Type	Set @	Ft.
18. I hereby certify that the fores	oing is true and correct Ry TITLE Prod. Supe	erintendemtтв <u>5-17-83</u>	
	(This space for Federal or S	tate office use)	
APPROVED BY	TITLE	DATE	

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

NUG 1 1 19**8**3

RECEIVED

AUG 29 1983

O.C.D. HOSSS OFFICE