

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 ☐
2. NAME OF OPERATOR
Chaveroo Operating Company, Inc.
3. ADDRESS OF OPERATOR
P. O. Box 763, Hobbs, NM 88241
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2630' FNL & 1310' FWL of Sec. 28
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

5. LEASE
NM-0108997-B
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Farrell Federal
9. WELL NO.
20
10. FIELD OR WILDCAT NAME
Chaveroo San Andres
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28, T7S, R33E
12. COUNTY OR PARISH
Roosevelt
13. STATE
NM
14. API NO.
30-041-20696
15. ELEVATIONS (SHOW DF, KDB, AND WD)
4419.0 GR

(NOTE: Report results of multiple completion or zone change on Form 9-339.)

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.)*

Spud 7:30 PM 2/22/84. Cemented 8 5/8" 24# J-55 casing at 1760 with 465 sacks Lite cement with 1/4# Flocele per sack & 300 sacks class C, 2% calcium chloride. Circulated 50 sacks. Plug down 2:05 PM 2/24/84. WOC 18 hours, tested casing with 500# for 30 minutes, test O.K.

Cemented 4 1/2" 10.5# J-55 casing at 4500 with 300 sacks class C 50/50 Pozmix, 5# salt per sack. Plug down 12:54 AM 3/2/84.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Peter W. Foster TITLE Agent DATE 5/9/84

ACCEPTED FOR RECORD (This space for Federal or State office use)
APPROVED BY PETER W. FOSTER TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: MAY 24 1984

RECEIVED BY
MAY 31 1984
O. C. D.
APTESIA, OFFICE

RECEIVED
JUN 4 1984
O.C.D.
HOBBS OFFICE