

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  
American Petrofina Co. of Texas
3. ADDRESS OF OPERATOR  
P.O. Box 2990 Midland, Texas 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 990 FNL & 1581 FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH: 990 FNL & 1585 FEL
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) Spud, set surface csg, test, set production csg, test

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 6:30 PM 10/24/84 w/12 1/4 bit to 446' set 8 5/8", 24#, J-55, new csg. @ 442 and cemented (Halliburton) w/275 sk class "C" cement w/2% CaCl ; cir 65 sks to surface. WOC 12 hr and test csg and BOP to 800 psi for 30 min-pressure loss 30 PSI (cement was Southwest EL Toro mix @ 50°F surface temp-calculated 12 hr compressive strength 550 PSI)

#36

11/2/84 - T.D. 4890

11/3/84 - Set 5 1/2" csg @ 4890 and cemented with 1175 sk Halliburton HLC plus 200 sks. CL. "H"; Circulated 100 sks. to surface; test casing to 1900 PSI; no pressure loss. MORT  
Prep for completion.

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

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

SIGNED David E. Brilling TITLE Dist. Drilling & Prod. Manager DATE November 6, 1984

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

DEC 6 1984