

Form
Dec. 1973

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OCT 19 1984

UNITED STATES
DEPARTMENT OF THE INTERIOR
O. C. D. GEOLOGICAL SURVEY

ARTESIA, OFFICE

NM OIL CONS. COMMISSIO

Drawer DD

Artesia, NM 88210

Form Approved.

Budget Bureau No. 42-R1424

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 Company of Texas

3. ADDRESS OF OPERATOR
P. O. Box 2990, Midland, TX 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2320 FNL, 1550 FEL Sec.30
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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

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(other) change of well number

5. LEASE

NM 0145685

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Horton Federal

9. WELL NO.
33 (change from 39)

10. FIELD OR WILDCAT NAME
Milnesand San Andres

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

30, 8S, 35E

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
GR 4212.6

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

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.)*

At the suggestion of the Roswell area office of the BLM and to ensure an orderly sequence of well numbers on the Horton Federal Lease, we are changing well no. 39 to well no. 33.

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

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

SIGNED J. C. Chapman TITLE Asst. Mgr./Prod. DATE 10/12/84

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER

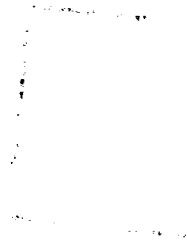
TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

OCT 17 1984

*See Instructions on Reverse Side



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OCT 22 1984
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