

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 ☒ gas ☐ other ☐
well well well
2. NAME OF OPERATOR
Morris R. Antweil
3. ADDRESS OF OPERATOR
P. O. Box 2010, Hobbs, NM 88241
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FSL and 660' FEL of Sec. 25
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 type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | <input checked="" 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) Put on pump <input type="checkbox"/> | <input type="checkbox"/> |

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.)*

Tested casing to 2000 psi - 30 mins - OR. Perforated Bough "D" with one shot per foot from 9861" - 9867'. Swabbed 147 Bbls water in 6 hours with no oil show. Released packer and POH. Ran pumping assembly with 1 1/4" X 2" X 24' pump and rods. Started pumping 11/13.

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

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

SIGNED John Miller TITLE Agent DATE November 14, 1985

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

Form Approved
Budget Bureau No. 42-R-424

NOV 19 1985

5. LEASE
NM54437
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
-
7. UNIT AGREEMENT NAME
-
8. FARM OR LEASE NAME
Conquest Federal
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Vada Penn
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 25-T8S-R35E
12. COUNTY OR PARISH
Roosevelt
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
4141' GR

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

ACCEPTED FOR RECORD
PETER W. CHESTER

NOV 21 1985

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

RECEIVED

NOV 25 1985

G.C.D.
HOBBS OFFICE