## N. M. CONS. COMMISSION

Form Approved. idget Bureau No. 42-R1424

	٠.	NM.	-055	8287	7 	
6.	IF	INDIAN.	ALLOT	TEE OF	RTRIBE	NAME

5. LEASE

DEPARTMENT OF THE INTERIOR XICO	88240
DEPARTMENT OF THE INTERIOR	
GEOLOGICAL SURVEY	

GEOLOGICAL SURVEY		- - - 1, 1
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME	
(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.)	8. FARM OR LEASE NAME	
1. oil gas	Haseloff Federal	
well well other	9. WELL NO.	
2. NAME OF OPERATOR	1 , 1	
Haseloff Corporation	10. FIFLD OR WILDCAT NAME	Ση
3. ADDRESS OF OPERATOR	Chaveroo-San Andres	
Box 249, Lovington, NM 88260	11. SEC., T., R., M., OR BLK. AND SURVI	EY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA '	
below.)	Sec: 13, T7S, R33E	<u> </u>
AT SURFACE: 1310' FSL Same 1310'FWL	12. COUNTY OR PARISH 13. STATE	
AT TOP PROD. INTERVAL: Same	Roosevelt New Mexic	CO
	14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, ANI	D WD)
DECUTED ADDROVAL TO CURE CURE CURE DEPORT OF	4332' GR	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	i e e e e e e e e e e e e e e e e e e e	
TEST WATER SHUT-OFF	į.	
SHOOT OR ACIDIZE	•	
REPAIR WELL	(NOTE: Report results of multiple completion	or zone
PULL OR ALTER CASING	change on Form 9-330.)	
MULTIPLE COMPLETE	₩	
CHANGE ZONES	i,	
ABANDON* U (other) Logs & Longstring		
(MINU)		<u>.</u>
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state	e all pertinent details, and give pertinent	dates
including estimated date of starting any proposed work. If well is discussed and true vertical depths for all markers and zones pertined	irectionally drilled, give subsurface location	ins and
11-14-85 Drilled to total depth	- 4400' at 10:15 P. M.	
11-15-85 T. D. 4400' - Ran Schlu	ambarana DII MCDI	
11-15-85 T. D. 4400' - Ran Schlu Ran 101 Joints (4401')	whoerger britings.	
S. T. & C Cemented	186 ava 60/60 Dag w/	
2 % D20 & 3# Salt per s	TO SAS DOVE OF	
5:45 P. M.	x- riug bown at	
11-16-85 T. D. 4400' - W O C	:	
11 10 0y 11 Di 1100 W 0 0	<b> </b> :	
	<u> </u>	
	[ .	
		<b>P</b> 4
Subsurface Safety Valve: Manu. and Type	Set @	rt
18. I hereby certify that the foregoing is true and correct		
	Land State of State o	
SIGNED Full Havite TITLE office Mill	MYRU DATE 11- 100	
White areas for Endowlers State of	Mice use)	

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

\_ DATE \_

ACCEPTED FOR RECORD

NOV 25 1985

\*See Instructions on Reverse Side

BUREAU OF LAND MANAGEMENT ROSWELL RESOURCE AREA

NON 26 1985