

Form 9-331  
Dec. 1973

N. M. OH. COM. COMMISSION  
P. O. BOX 1980  
ROSETT, NEW MEXICO 88240

Form Approved  
Budget Bureau No. 42-R1

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 ☐ Injection Well

2. NAME OF OPERATOR  
C.E. LaRue and B.N. Muncy, Jr.

3. ADDRESS OF OPERATOR  
PO Box 470 Artesia, NM 88210

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 660' FNL & 1980' FWL

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\* ☐

(other) ☐

5. LEASE  
LC062486

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal Trigg

9. WELL NO.

20

10. FIELD OR WILDCAT NAME

Caprock Queen

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

Sec. 9 T14S R31E

12. COUNTY OR PARISH 13. STATE

Chaves NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
4141.8 GL

(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 date, 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.)

Hole in casing at 1050'.

Rig up on 4½" casing. Pump 75 sacks Class C 10# Gilsonite ½# FC 2% CC.

Pump 75 sacks Class C w/2% CC. Shut down closed in valve on casing.

Put Dry Hole Marker on well. Plugged and Abandoned 1-20-86.

AS PER STATE RECOMMENDATIONS.

Subsurface Safety Valve: Manu. and Type

Set @ \_\_\_\_\_ Ft.

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

SIGNED

TITLE Operator

DATE 4-9-87

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE  
Approved as to plugging of the well bore  
Liability under bond is retained until  
surface restoration is completed.

APPROVED  
PETER W. CHESTER

AUG 3 1988

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA