APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Form 9–331 Dec. 1973	Form Approved. Budget Bureau No. 42-R1424
UNITED STATES	5. LEASc
DEPARTMENT OF THE INTERIOR	NM-0155254-A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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
4	Amco Federal
1. oil gas	9. WELL NO.
2. NAME OF OPERATOR	14
SHELL OIL CO.	10. FIELD OR WILDCAT, NAME
3. ADDRESS OF OPERATOR	Cato (San Andres)
P. O. Box 1509, Midland, Texas 79702	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.)	Sec. 33, T-8-S, R-30-E
AT SURFACE: 1980' FSL and 660' FWL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Same	Chaves New Mexico
AT TOTAL DEPTH: Same	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	NA NA
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 4133' DF
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	·
FRACTURE TREAT	94
SHOOT OR ACIDIZE	(NOTE: Report result of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	
CHANGE ZONES	JUN 6 1979
ABANDON* ☑ □	
(other)	U.S. GEOLUS
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertined. 1. Pull prod equipment.	firectionally drilled, give subsurface locations and

gas 1. oil well 🗵 well other 2. NAME OF OPERATOR SHELL OIL CO. 3. ADDRESS OF OPERATOR P. O. Box 1509, Midland, Texas 79702 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 AT SURFACE: 1980' FSL and 660' FWL AT TOP PROD. INTERVAL: Same 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* \mathbf{x} (other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly st including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertin Pull prod equipment. 1. Spot 20 sx cmt @ TD (est. 300' of fill for 20 sx cmt). Fill the hole w/salt gel mud consisting of 10# brine w/25# of gel/bbl. 3. Cut 4 1/2" csg from as deep as possible. Spot 100 sx cmt @ stub before pulling out csg (est. 200' of fill for 100 sx cmt in 11" hole). Spot 100 sx cmt above top of salt @ 1050' (est. 240' of fill for 100 6. sx cmt in 10" hole). Spot 50 sx cmt from 324' upward. Top of cmt must be 50' up inside 7. 9 5/8" csg (est. 100' of fill inside 9 5/8" csg). Spot cmt in 9 5/8" @ surf from btm of cellar down 20'. 8. Mark location w/4" OD steel pipe @ least 4' above GL w/"Amco Federal No. 14, Sec. 33-8S-30E" welded on pipe. 10. Clean location Subsurface Safety Valve: Manu. and Type Set @ 18. I hereby certify that the foregoing is true and correct G. W. Tullos June 4, 1979 TITLE Senior Prod. Eng. DATE

(This space for Federal or State office use)

DATE

TITLE