NH OIL CONS. COMMISSION

Form Approved. Budget Bureau No. 42-R1424

Drawer DD

Artesia, NM

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DEPARTMENT	OF	THE	INTERIOR
GEOLOGI	CAL	SUF	VEY

UNITED STATES

PARTMENT OF THE INTERIOR	NM9407-A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
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.)	7. UNIT AGREEMENT NAME 3. FARM OR LEASE NAME AND 16 1984		
1. oil gas other	Peterson Federal O.C. D. 9. WELL NO. ARTESIA, OFFICE		
2. NAME OF OPERATOR P & R Oil Company	# 1 10. FIELD OR WILDCAT NAME Cato		
3. ADDRESS OF OPERATOR P.O. Box 1284 Lovington, N. M. 88260 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 6, T9S-R30E		
below.) AT SURFACE: 1980' FS&EL of Section 6 AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE Chaves New Mexico 14. API NO.		

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)

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

4079.1 GL

RE iqqqor zone (NOTE: Report results of multiple compl 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.)*

- Tag bottom with tubing 1.)
- Pull tubing and talley 2.)
- Run tubing back below perfs. 3.)
- Pump well down
- Pressure tubing 400 lbs.
- Dump 500 gal. 15% N.E. HcL acid 6.)
- Wait 2 hrs. 7.)
- Pump 60 barrels formation water down casing--wait 2 hrs. 8.)
- Return well to production

Subsurface Safety Valve: Manu. and Type		Set @	Ft.
signed face Strue and correct operator	DATE	11-23-83	
APPROVED (This space for Federal or State office use) APPROVED (This space for Federal or State office use) APPROVED TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE		

JAN 13 1984

