Form 9-331 Dec. 1973

h ... OIT CONST COWWISSION P. O. BOX 1980

HOBBS, NEW MEXICO 88240

Form Approved. Budget Bureau No. 42-R1424

DEPARTMENT OF THE INTERIOR	5. LEASE NM - 13418 6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
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.)	7. UNIT AGREEMENT NAME	
reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME	
1. oil gas	Amoco Federal	
well well other Shut-In Well	9. WELL NO.	
2. NAME OF OPERATOR	5	
Flag-Redfern Oil Company	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR	Tom-Tom (San Andres)	
P.O. Box 11050 / Midland, Texas 79702 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
below.)	Sec. 26 T-7-S R-31-E	
AT SURFACE: 660' FSL and 1980' FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE NM	
AT TOTAL DEPTH:	14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)	
DECUISET FOR APPROVAL TO SUPPRESUE DEPORT OF	GR-4371	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF	• ;	
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		
ABANDON*		
(other) Approval for Shut-In Well	:	

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.)* Well currently shut-in due to non-successful completion attempt in the P-2 zone of San Andres. This wellbore is being held for future use as a water injection well or water disposal well. The casing was pressure tested to

750 psig on 9-05-85. The casing is secured at surface with a wellhead and

varves.		
Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true	and correct	Set @ Ft
SIGNED Kelly Jamesson	TITLE Engineer DATE	9-30-850070 2 935
(ті	his space for Federal or State office use)	
APPROVED BY CONDITIONS OF APPROVAL, IF ANY: APPROVED FOR MONTH PERIOD ENDING DCT 8 1986	PETER W. CHESTER OCT 8 1985 *See Instructions on Reverse Side BUREAU OF LAND MANAGEMENT ROSWELL RESOURCE AREA	

Mecender 1985