Form 9-331 Dec. 1973

UNITED STATES DEPARTMENT OF THE INTERIOR

			Form Approved. Budget Bureau No. 42-R1424			
	5. LEASE			,		
_	NM 9208	8- <u>A</u>				
	6. IF INDIAN,	ALLOTTE	OR TE	RIBE NAM	E	
-						
	7. UNIT AGRE	EMENT N	AME	7 . t		
_						
1	B. FARM OR L					
	Morgan	Federa]				
] !	9. WELL NO.					
	1			A - 3		
10	D. FIELD OR V	VILDCAT N	IAME			
<u></u>	Wildcat					
1:	L. SEC., T., R.			ID SURVE	Y OR	
	AREA		ď,			
	_Sec. 6,	_T10S.	R30E			
12	2. COUNTY OF	R PARISH	13. S	TATE		
	Chaves	3.1. 1.2	N	ew Mex:	ico	
14	L API NO.	节条 5 智	₹.	3,415		
	30-005-	20667				
15	. ELEVATION	S (SHOW	DF, K	DB, AND	WD)	
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DEFARTMENT OF THE INTERIOR	<u>NM 9208-A</u>
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 an As decree	on on on on on on on on on
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
·····································	Morgan Federal
Wen Garet	9. WELL NO.
2. NAME OF OPERATOR Eyyon Corporation ARTESIA, DEFICE	1
Exxon Corporation ARTESIA, OFFICE 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME
D O D 1600 MAT 4 -	Wildcat
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OF
below.)	されば当 し
AT SURFACE: 1,980'FWL and 990'FNL of Section	Sec. 6, T10S, R30E 12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	
	Chaves New Mexico
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	30-005-20667
REFORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
SHOOT OR ACIDIZE REPAIR WELL SHOOT OR ACIDIZE SHOTT OR ACIDIZE SHOOT OR ACIDIZE SHOTT OR ACIDIZE	
PULL OR ALTER CASING II	(NOTE: Report results of multiple completion or zone
MULTIPLE COMPLETE JUN 1	L 9 1979 - 5 330.)
CHANGE ZONES	The second secon
(other) ADTECIA A	PICAT STISSET BEST BEST BEST BEST BEST BEST BEST
Tar Decorates	TEN MEXICO
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dir measured and true vertical depths for all markers and zones pertinent	all pertinent details, and give pertinent dates,
measured and true vertical depths for all markers and zones pertinent	to this work.)*
6-5-79 Sec BP @ 9200', pumped 30' of sand or	top PR TD 9170! Sot protect
e 0/30 reriorated Strawn w/1 9/16"	Salect - Fire @ 9797 00 00
90, 91, 92, 93, 94, 95, 96, 97, 98, 9	19 8800-01 with 15 shots Product
down reris W/4 BW. Broke (d /9/)()# Pi	mp rate 1/2 DDM A D- 1600
Final 1700, 151P 1550, After 10 mins	975
O-0-77 Swapped. Acidized 8/8/-8801 tr/2006 a	rale 15% mor
6-8-79 Set, BP @ 4200, dumped 30'sand on top	PBD 4170. Perfed 5½" casing
w/1 9/16" Omega jet gun 4000-4006 w/1 6-9-79 Acidized w/1000 gals. 7½ % MFR-100 w/	shot per ft.
5# J-1 Fric. Red.Form broke at 3750 p	si May 4500% are for the
Pr. 3700' Instant SI Pr 2800#. 5 min.	2750# 15 min 2700# crrba
0-14-79 Flugging to abandon.	2720%. 3wbd.
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED Millow Knipling TITL Proration Specia	listate 6-15-79
(This space for Federal or State office	use)
APPROVED BY COCHUMN THACTING DISTRICT F	<u>NGINEER</u>
CONDITIONS OF APPROVAL, IF ANY:	# 100 00 00 00 00 00 00 00 00 00 00 00 00
*See instructions on Payarea Side	9#4# 8 3 44