

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 develop a well or to develop a reservoir. Use Form 9-331-C for such proposals.)

RECEIVED

1. oil ☒ well gas ☐ well other ☐

FEB 25 1980

2. NAME OF OPERATOR
Exxon Corporation

U.S. GEOLOGICAL SURVEY

3. ADDRESS OF OPERATOR
P. O. Box 1600, Midland, Texas 79702

ARTESIA, NEW MEXICO

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

AT SURFACE: 660' FSL & 660' FEL of Section
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* ☐

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(other) Change Plans

5. LEASE
N. M. 15677A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
--

7. UNIT AGREEMENT NAME
--

8. FARM OR LEASE NAME
Strange Federal

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Tomahawk San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 25, T7S, R 31E

12. COUNTY OR PARISH
Chaves

13. STATE
New Mexico

14. API NO.
30-005-20717

15. ELEVATIONS (SHOW DF, KDB, AND WD)
Gr. 4418.2'

(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 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.)*

The 24# 8 5/8" surface casing will be set at 1800' and cemented back to surface with 900 cu. ft.

The original Application of Permit to Drill was submitted showing the surface to be set in the above manner. A Sundry Notice was submitted which changed the amount of surface casing.

This was discussed with Mr. Ray Stall on 2-22-80.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Meera Kriplan TITLE Proration Specialist DATE 2-22-80

(Orig. Sgd.) GEORGE H. STEWART (This space for Federal or State office use)

APPROVED BY _____ TITLE ACTING DISTRICT ENGINEER DATE _____
CONDITIONS OF APPROVAL, IF ANY:

FEB 25 1980

OIL CONSERVATION DIV.

FEB 27 '80

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