well

Drawer DD

88210	5. LEASE	
1	3734 7 0	

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PARTMENT	OF	THE	INTERIOR			NM-

6.	IF INDIAN,	ALLOTTEE	OR	TRIBE	NAME RECEIVE
					RECEIVE

DEPARTMENT	OF	THE	INTERIOR
GEOLOGI	CAL	SUR	RVEY

7. UNIT AGREEMENT NAME

APR 3 0 1982

SUNDRY	NOTICES	AND	REPORTS	ON	WELLS
o not use this fo servoir, Use Form	rm for proposals 19–331–C for suc	to drill o	or to deepen or po als.)	lug bac	k to a different

8. FARM OR LEASE NAME <u>Wattam Federal</u>

O. C. D.

1. oil gas

well

other

9. WELL NO.

ARTESIA, OFFICE

2. NAME OF OPERATOR

Exxon Corporation

10. FIELD OR WILDCAT NAME Cato San Andres

3. ADDRESS OF OPERATOR

P. O. Box 1600, Midland, Texas 79702

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17

<u>Sec. 6, T8S, R31E</u>

AT SURFACE: 660' FNL and 660' FWL of section AT TOP PROD. INTERVAL:

12. COUNTY OR PARISH 13. STATE Chaves New Mexico

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) 4211' GR

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF

FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

SUBSEQUENT REPORT OF:

(NOTF: Report results of multiple completion or zone change on Form 9-330.) APR 26 1982

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES **ABANDON*** (other)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work it well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Drilled 7 7/8" hole to 3900' TD

Ran 95 jts 3890 5 1/2 14# K-55 csg set at 3900'

Cmt w/1400 sx Lite weight, tailed w/250 sx Class "C"

Cmt, plug down 3:44 p.m. 2-19-82. CIRC 15 sx.

WOC 28 days

Tested 5 1/2" csg at 9:00 a.m. 3-20-82 w/1500 Held OK

Preparing to Perf

ACCEPTED FOR RECORD

Subsurface Safety Valve: Manu. and Type _

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

TITLE Sr. Administrator DATE Affil 19, 1982

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: TITLE

RECEIVED

MAY MATTER HOSBS OFFICE