

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 deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other ☐ DIST. 6 N. M.
2. NAME OF OPERATOR
John S. Goodrich
3. ADDRESS OF OPERATOR
3100 N. "A", Bldg. E, Suite 103, Midland, TX 79705
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FNL & 660' FEL
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 | <input type="checkbox"/> | | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | | <input checked="" type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | | <input checked="" type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | | <input type="checkbox"/> |
| (other) | | | |

5. LEASE
NM-16819
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Williams Federal
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
SE Chaves - Queen Gas Area Assoc.
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 8, T-13-S, R-31-E
12. COUNTY OR PARISH
Chaves
13. STATE
NM
14. API NO.
30-005-20900
15. ELEVATIONS (SHOW DF, KDB, AND WD)
4071.7' KDB

(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.)*

1. Ran Gamma Ray Neutron log. Perforated Queen formation 2555' to 2562' (15 holes) and 2570' to 2574' (9 holes) on 6-27-83.
2. Ran 83 jts. tubing. Treated with 500 gallons 15% Hcl followed with 20,000 gallons gelled Kcl water and 13,500# 20/40 sand plus 10,000# 10/20 sand on 6-27-83.

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

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

SIGNED Peter W. Chester TITLE Operator DATE 11-04-83

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY PETER W. CHESTER TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

MAY 16 1984

RECEIVED
MAY 21 1984
O.C.D.
HOBBS OFFICE

RECEIVED BY
MAY 17 1984
O. C. D.
ARTESIA, OFFICE