

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 ☒ gas ☐ other ☐  
well well

2. NAME OF OPERATOR  
Petroleum Exploration Company, Inc.

3. ADDRESS OF OPERATOR  
P.O. Box 809, Roswell, New Mexico 88201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980 FNL & 1650 FEL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

5. LEASE  
NM-067707

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME RECEIVED BY

8. FARM OR LEASE NAME  
Siete-Federal OCT 05 1983

9. WELL NO.  
3 O. C. D.  
ARTESIA, OFFICE

10. FIELD OR WILDCAT NAME  
Siete-San Andres

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

Sec. 17: T-8-S, R-31-E, N.M.P.M.

12. COUNTY OR PARISH  
Chaves

13. STATE  
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
4198 GR 4208.5 KB

(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.)\*

9-24-83 Drilled to total depth of 3852' - 11:45 A.M. - Ran Schlumberger LDT-CM-DLL-MSFL, CEL, and Cyberlook Logs.

9-25-83 Ran 95 joints of 4 1/2", 10.5#, J-55 S.T. & C. casing to 3831' K.B.M. and cemented with 200 sxs. Halliburton 50/50 pos. - 500 gallon mud flush. Plug down at 8:20 A.M.

9-26-83 W.O.C.

Subsurface Safety Valve: Manu. and Type

Set @ \_\_\_\_\_ Ft.

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

SIGNED

TITLE Vice-President

DATE September 29, 1983

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

OCT - 3 1983

RECEIVED  
OCT 11 1983  
O.C.D.  
HOBBS OFFICE

RECEIVED  
OCT 11 1983  
O.C.D.  
HOBBS OFFICE