

NM OIE COM. COMMISSION
Drawer DD
Artesia, NM 88210

Form Approved
Budget Bureau No. 42-R1424

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

2. NAME OF OPERATOR

Forister & Sweatt

3. ADDRESS OF OPERATOR

P. O. Box 161, Artesia, NM 88210

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

AT SURFACE: 1830' FNL & 1980' FWL

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 ON:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) ☐

5. LEASE

NM 31114

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

O. C. D.

7. UNIT AGREEMENT NAME

ARTESIA, OFFICE

8. FARM OR LEASE NAME

Sabine Federal

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

SE Chaves Queen Association

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

Sec. 17, T-13S, R-31E

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4045.5 GL

(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.)*

7/27/84:

- Well plugged as follows: TD 2620'
1 - 25 Sxs Plug @ 2609' - 2506' - Class H. Cement
1 - 25 Sxs Plug @ 1793' - 1693' - Class H Cement

- Set 25 Sxs Class H cement with 4% calcium chloride @ 451'.
Waited 4 hours - tagged cement @ 434'. Set 10 Sxs class H cement with 4% calcium chloride @ 434' - tagged cement @ 400'. Set 30 Sxs class H cement with 4% calcium chloride @ 400' - 325'.

- Set 20 Sxs plug in top of 8-5/8" casing.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED

[Signature]

TITLE

Prod. Clerk

DATE

August 15, 1984

APPROVED

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL

PETER W. CHESTER

TITLE

DATE

NOV 8 1984

*See Instructions on Reverse Side

M

RECEIVED
NOV 13 1952

RECEIVED

RECEIVED

NOV 13 1952