

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 ☐ wildcat

2. NAME OF OPERATOR
Dalport Oil Corp.

3. ADDRESS OF OPERATOR
3471 InterFirst One

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 1980' FN&EL
AT SURFACE:
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:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input 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) Spud - surface casing	

5. LEASE
NM 0349837

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Arco-Federal

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
7-14S-31E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

14. API NO.

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

(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.)*

12-19-84 - W.E.K. Drilling Co. spudded 8:00 p.m.

12-20-84 - Western cemented 874' of 8-5/8-24# (R III) at 884' w/290 sx Lite + 3% c.c. + 200 sx 'C' + 2% c.c., circulated 93 sx, plug down 7:15 p.m.

12-21-84 - WOC 18 hours. Drilled out plug. Tested BOP 1000#/30" ok.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED Peter W. Chester TITLE Geologist

DATE 12-26-84

APPROVED BY
CONDITIONS OF APPROVAL

PETER W. CHESTER

TITLE

DATE

JAN 17 1985

RECEIVED BY
JAN 24 1985
O. C. D.
ARTESIAL OFFICE

RECEIVED
JAN 29 1985
O. C. D.
HOUSTON OFFICE