

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
Petroleum Exploration Company, Inc.
3. ADDRESS OF OPERATOR
P.O. Box 809 Roswell, NM 88201
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2310' FSL & 1980' FWL
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) <u>Surface Casing Notice</u>		<u>X</u>	

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.)*

5-1-85 Spudded well @ 1:30 PM

5-3-85 Drilled to 1245'. Ran 30 jts. 8 5/8", 24# casing(1229'). Set Depth: 1241' KB. Cemented w/ 350 sacks Haliburton Lite and 100 sacks Class "C" w/ 2% CaCl₂. Circulated 30 sacks. Plug down @ 12:00 Noon 5-3-85. WOC- 12 hrs.

5. LEASE
NM 067707
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Siete Federal
9. WELL NO.
#6
10. FIELD OR WILDCAT NAME
Siete San Andres
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 17
T8S, R31E
12. COUNTY OR PARISH
Chaves
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
4193 GL, 4203 KB

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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

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

SIGNED Wesley Bogdan TITLE Sec./Tres. DATE 5-3-85

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

(This space for Federal or State office use)

ACCEPTED FOR RECORD
PETER W. CHESTER

DATE _____

MAY 7 1985

*See Instructions on Reverse Side
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

RECEIVED

MAY 9 1963

NOVA 2010