

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  
Coastal Oil & Gas Corporation
3. ADDRESS OF OPERATOR  
P. O. Box 235 Midland, Texas 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FEL & 660' FSL  
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 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>Determine mechanical condition</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.)\*
- 1-21 RU pulling unit. GIH to pick up pkr at 9660'. Unable to latch on pkr.
- 1-22 Fish for pkr, POOH with same. Ran casing inspection log. Casing thru appears to be in reasonably good shape.
- 1-29
- 1-30 Drilled out cement and CIBP at 9760'-9775'. Circ hole clean and TOH. thru Well SI pending word on C-108 application.
- 2-6

LEASE	
NM 2842-A	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME	
Federal "20"	
9. WELL NO.	
1	
10. FIELD OR WILDCAT NAME	
Baum	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
20, T-13-S, R-33-E	
12. COUNTY OR PARISH	13. STATE
Lea	NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD)	
GR 4256; KB 4267'	

(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 Bobby L. Smith *BLSmith* TITLE Petroleum Engineer DATE February 26, 1985

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 2-28-85  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

RECEIVED

MAR - 4 1985

U.S. DEPT. OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION