

N. M. OIL & GAS COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240
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
Chevron U. S. A., Inc.

3. ADDRESS OF OPERATOR
P. O. Box 1660 Midland, Texas 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: Unit M 660' FSL & 660' FWL
AT TOP PROD. INTERVAL: 3920'
AT TOTAL DEPTH: 4255'

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 checked="" 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) <input type="checkbox"/>	<input type="checkbox"/>

5. LEASE
Maljamar Grayburg Unit LC 059576

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Maljamar Grayburg Unit

8. FARM OR LEASE NAME
Maljamar Grayburg Unit

9. WELL NO.
10

10. FIELD OR WILDCAT NAME
Maljamar (Grayburg-San Andres)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 3, T-17-S, R-32-E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

14. API NO.
NA

15. ELEVATIONS (SHOW DF, KDB, AND WD)
GR 4168

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, 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.)*

POOH w/ rods & pump & tbq. laying down.
RIH w/ pkr. Set @ 3852'. Load backside, test csg. to 500# for 15 minutes-held ok.
Swab test well to determine productivity.
Hydro-test tbq. in hole.
Pump scale converter, 2000 gals. 15% acid, & inhibitor.
POOH w/ pkr. RIH w/open ended tbq. Land @ 4175'. RIH w/rods & pump.
Place well on production @ 10:00 AM 12-30-83.

Date work started 12-2-83

Prior to this work, the well was temporarily abandoned.

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

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

SIGNED Shawn E. Hammel TITLE REG ASST. DATE 1-5-84

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY GWQ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAY 9 1984

Carlsbad, NEW MEXICO *See Instructions on Reverse Side

RECEIVED
MAY 11 1984
O.C.D.
HOBBS OFFICE