ABANDON* (other)

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES

N. M. OIL CONS. COMMISSION

P. O. BOX 1080

Form Approved. Budget Bureau No. 42-R1424

HOBBS, NEW MEXICO UNITED STATES 5. LEASE

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DEPARTMENT	OF	THE	INTERIOR					
GEOLOGICAL SURVEY								

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	NM-04242 6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
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.)	7. UNIT AGREEMENT NAME			
1. oil gas well other	8. FARM OR LEASE NAME Denius Federal 9. WELL NO.			
2. NAME OF OPERATOR Grauten & Pepper	10 10. FIELD OR WILDCAT NAME			
3. ADDRESS OF OPERATOR P. O. Box 763, Hobbs, NM 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 2310' FSL & 2117' FWL of Sec. 33 AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	Maljamar - GB-SA 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T17S, R33E 12. COUNTY OR PARISH 13. STATE Lea NM			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO. 15. ELEVATIONS (SHOW DF, KDB, AND WD)			
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MAR 15	(NOTE: Report results of multiple completion or zone 1982 thanks on Form 9–330.)			

ROSWELL, NEW MEXICO 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.)*

OIL & GAS U.S. GEOLOGICAL SURVEY

Work began 3/4/82. Fished rods and pump. Pulled and replaced 2 joints tubing. Ran rods and pump. Well returned to production 6:30 PM 3/6/82.

Subsurface Safety Valv	e: Manu. and Type				Set @	Ft
18. I hereby certify that	t the foregoing is true a		Agent	DATE	3/9/82	
	PTED FOR RECORDING ER W. CHESTER AL, IF ANY: 1982	1	ederal or State offic			
	OLOGICAL SURVEY	See Instruc	tions on Reverse S	ide		

RECEIVED
HANGE MAY. 4 1982

HORRE OFFICE