Form 9-331 Dec. 1973

Form Approved. Budget Bureau No. 42-R1424

N. M. DIL CONS. COMMISSION P. O. BOX 1980 UNITED STATEROBBS, NEW MEXICO 882

	A 11	777 4	-	
32	510 LEASE	•		
2	FASE			

DEPARTMENT OF THE INTERIOR	Cockburn Federal NM 04242		
GEOLOGICAL SURVEY	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 Cockburn Federal NM 04242		
1. oil gas G	8. FARM OR LEASE NAME		
well well other S.W.D. 2. NAME OF OPERATOR	9. WELL NO. # 8		
M & W of Lovington, Inc.	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR Box 922, Lovingtn, N.M. 88260	Corbin Queen 11. SEC., T., R., M., OR BLK. AND SURVEY OR		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA S-34, T-17S, R-33E NMPM		
AT SURFACE: 2310 FSL & 330' FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Lea County New Mexico		
AT TOTAL DEPTH: 4702	Lea County New Mexico 14. API NO.		
 CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 			
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	15. ELEVATIONS (SHOW DF, KDB, AND WD) DF 4122		
FRACTURE TREAT	(NOTE: Report results of multiple completion or zone change on Form 9–330.)		
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertinent	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and t to this work.)*		
1. We prepose to start W.O. on the 2/1/83	**		
2. Set bridge plug @ 3700' and pressure tes	t casing to 1500# for 30 min.		
3. Run tubing & production equipment and re	turm well to production.		
4. Well plugged back to 4300° 10/56			
5. Existing perfs 3800' to 3820'	Į.		
	3 1982		
Subsurface Safety Valve: Manu. and Type	OIL 2 ORS MINERALS MOMT. SERVICE ROSWELL, NEW MEYING		
18. I hereby certify that the foregoing is true and correct			
/ / - // / //	DATE 12/7/ 8 2		
(This space for Federal or State off			
(Orig Sol.) FLTER W. CHESTER THE	DATE		
CONDITIONS OF APPROVADE CANY 4 1982			

FOR

JAMES A. GILLHAM DISTRICT SUPERVISOR . See Instructions on Reverse Side

RECEIVED

DEC 1 6 1982

HOBBS OFFICE

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