

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 ☐ gas ☐ other ☒ Water Injection

2. NAME OF OPERATOR
Cities Service Company

3. ADDRESS OF OPERATOR
P.O. Box 1919 - Midland, Texas 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980'FSL & 1980'FEL
AT TOP PROD. INTERVAL: Same as above
AT TOTAL DEPTH: Same as above

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) Reactivate as Wtr. Injection			

5. LEASE
LC 060967

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
SMGSAU

8. FARM OR LEASE NAME
Tract 1

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Maljamar (G-SA)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 30-T17S-R33E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

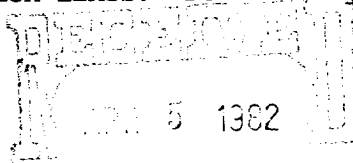
14. API NO.
N.A.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4057' GR

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

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.)*

O.T.D. 4281' Lime, OPBTD 4280'. Workover complete. MIRU pulling unit and opened well up and backflowed to pits. 14 hr. SITP 1150#. Bled well down to pits. Acidized Premier Perfs 4197 - 4249' w/5000 gals 20% HCl acid + additives. Max press 3500#, min press 2800#, AIR 2.8 BPM, ISIP 2300#, 10 min SIP 1800#. Flowed load water and hooked up to injection lines. Started injecting 675 BWPD @ 1950 psi.



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

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

SIGNED Elmer Stutz TITLE Region Opr. Mgr. - DATE April 1, 1982

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

5. ACCEPTED FOR RECORD

APR 7 1982
U.S. GEOLOGICAL SURVEY
DOWELL NEW MEXICO