

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N.M. OIL CONS. COMMISSION
P.O. B. 1980
HOBBS, NEW MEXICO 88240

Form Approved.
No. 42-R1424

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
Robert N. Enfield

3. ADDRESS OF OPERATOR
P. O. Box 2431, Santa Fe, NM 87504

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL and 1980' FEL Sec. 29
AT TOP PROD. INTERVAL: same
AT TOTAL DEPTH: same

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) Temporarily abandon		

5. LEASE

LC 069276

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hudson "29" Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Corbin, S. Morrow Bone Spring

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 29, T18S, R33E

12. COUNTY OR PARISH

Lea

13. STATE

NM

14. API NO.

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

(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.)*

Would like to carry as a temporarily abandoned well as am presently looking at converting it to a salt water disposal well.

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

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

SIGNED Robert N. Enfield TITLE Operator DATE December 10, 1993

(ORIG. SGD.) DAVID R. GLASS PETROLEUM ENGINEER DEC 16 1993
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

SEE ATTACHED