

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED 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 ☒ other2. NAME OF OPERATOR
Coquina Oil Corporation3. ADDRESS OF OPERATOR
P. O. Drawer 2960 Midland, TX 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1980' FNL & 660' FEL

AT TOP PROD. INTERVAL:

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 ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐

(other) Spud and Cmt Surface Csg X

5. LEASE

NM 17435 - A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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7. UNIT AGREEMENT NAME

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8. FARM OR LEASE NAME

Shelly Com Federal Com

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Undesignated

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

Sec. 5, 19S, 32E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

14. API NO.

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

3669' 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.)*

Spudded well @ 12 midnight, 7/29/80. Drilled a 17½" hole to 410'. Ran 417' of 13-3/8", 54.5#, K55, STC surface casing and set at 410'. Cemented w/425 sx C1 "C" w/2% CaCl and ¼# flocele. Circulated to surface 75 sx. Plug down @ 2:00 pm, 7/30/80. WOC 18 hours. Tested casing to 600 psi for 30 min., no leak off.

RECEIVED

AUG 8 1980

Subsurface Safety Valve: Manu. and Type

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

Ft.

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

SIGNED E. L. Crain TITLE Drilling Manager DATE 8/7/80

(This space for Federal or State office use)

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