

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 ☐  
well well

2. NAME OF OPERATOR

TXO Production Corp.

3. ADDRESS OF OPERATOR

900 Wilco Bldg. Midland, TX 79701

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

AT SURFACE: 660' FSL & 660' FWL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

(other) Begin drilling operations

5. LEASE

NM-2945

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

French Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Querecho Plains (Upper Bone Springs)

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

Sec. 24, T-18-S, R-32-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

14. API NO.

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

3777 GL & 3789 KB

(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.)\*

2-15-86 Spud 15" hole. Rn 11-3/4" casing. <sup>350'</sup> Cmt w/725sx "C" 2% CaCl. 5 centralizers. Circulated 125sx to pit. WOC.

2-16-86 Drlg 11" hole.

thru

2-20-86

2-21-86 Rng 8-5/8" csg. Set @ 2800'. Cmt w/1500 sx lite and 500sx "C" 2% CaCl. Circulated 200sx to pit. WOC.

2-22-86 Drlg 7-7/8" hole.

thru

3- 5-86

3- 5-86 Logging

3- 6-86 Rng 4-1/2" csg. Set @ 38700'. Cmt w/600sx lite 3. Tail in w/180sx lite 5. WOCU

Subsurface Safety Valve: Manu. and Type

Set @ \_\_\_\_\_ Ft.

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

SIGNED Erica Henderson TITLE Engineering Ass't DATE 3-10-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

GWD

MAR 31 1986

\*See Instructions on Reverse Side

CAPESBAD, NEW MEXICO

RECEIVED  
APR 1 - 1986  
C.C.D.  
HOBBS OFFICE