

N. M. OIL CONS. COMMISSION  
P. O. BOX 1800  
HOBBS, NEW MEXICO 88240

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 well ☐ gas well ☒ other ☐

2. NAME OF OPERATOR  
Aminoil USA, Inc.

3. ADDRESS OF OPERATOR  
P. O. Box 10525 Midland, Texas 79701

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980' FWL & 2310' FSL of Section  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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

5. LEASE  
NM 073240

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Federal 30

9. WELL NO.  
2

10. FIELD OR WILDCAT NAME  
Gem Morrow

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 30, T-19-S, R-33-E

12. COUNTY OR PARISH  
Lea

13. STATE  
New Mexico

14. API NO.  
NM-073240

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3589.2 GR

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

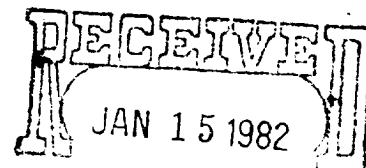
|                      |                          |                          |
|----------------------|--------------------------|--------------------------|
| TEST WATER SHUT-OFF  | <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT       | <input type="checkbox"/> | <input type="checkbox"/> |
| 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) Activity for 1/2/82 to 1/8/82

(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.)\*

1/2/82 Drlg @ 4955', w/no returns; wt. 9.0  
1/3/82 Drlg @ 5115', w/no returns; wt. 9.0  
1/4/82 Drlg @ 5300', w/no returns; wt. 8.9  
1/5/82 TD 5315', Rng 9 5/8" casing  
1/6/82 TD 5315', Ran 9 5/8" 36# & 40# casing & set @ 5315'  
1/7/82 TD 5315', ND BOP's cemented 9 5/8" csg w/3181 sx; cement circ.  
1/8/82 TD 5315', Ran Temp. Survey, setting out 12" BOP's



Subsurface Safety Valve: Manu. and Type

OIL & GAS  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

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

SIGNED Roger A. Chapman TITLE District Operations Manager DATE January 8, 1982

ROGER A. CHAPMAN

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL

JAN 26 1982

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

\*See Instructions on Reverse Side