

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  
The Superior Oil Company
3. ADDRESS OF OPERATOR  
P.O. Box 3901, Midland, Texas 79702
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980' FNL, 1980' FEL of Section 9  
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 <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) 9 5/8" Csg. Detail.                   |                          |

5. LEASE  
NM-0554858
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Government "9"
9. WELL NO.  
1
10. FIELD OR WILDCAT NAME  
Scharb (Bone Spring)
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Section 9, T19S, R35E
12. COUNTY OR PARISH  
Lea
13. STATE  
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3822.7' GR

**RECEIVED**  
NOTE: Report results of multiple completion or zone change on Form 9-330.)  
APR 1 1983

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. Drld. to 4120'.
2. Ran 9 5/8" 47# S-95 LT&C csg, set @ 4120', cmtd. w/1500 sx B-J Lite cmt w/15#/sx salt, 1/4#/sx cello flakes, 2% D-46, followed w/300 sx Class C w/5# sx salt, 2% D-6. Bumped plug w/2000# - held O.K. Circ 150 sx cmt to surface. Tested csg to 3000 # - O.K. WOC 24 hrs.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED [Signature] TITLE Area Prod. Supt. DATE 4-4-83

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) DAVID R. GLASS  
CONDITIONS OF APPROVAL APR 15 1983

ROSWELL, NEW MEXICO

\*See Instructions on Reverse Side