

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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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: 660' FSL, 660' FWL of Section 10

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)

7" Casing Detail

LEASE

NM-0554858

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Government "10"

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Scharb (Bone Spring-Wolf)

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

Section 10, T19S, R35E

12. COUNTY OR PARISH

Lea

13. STATE

NM

14. API NO.

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

3795.9' 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.)\*

1. Ran 62 jts. 7" 35# Hydril T.S., 203 jts. 7" 29# Hydril T.S. (total 10,929.24'), set @ 10,920' by csg tally + 20 centralizers.
2. Circulated.
3. Cemented w/280 sx Class H, 2% KCl + .6% D-19, .15% R-5, followed w/180 sx Class H, 2% ca cl 2, 6% D-19, .1% R-5. Displaced 1400 bbls fresh wtr. Bumped plug w/2500# (500# over ppg pressure) - held O.K.
4. ND BOP's, set slips and cut off csg, NU Well head, released rig.

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

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

SIGNED G. E. Tate TITLE Division Opr. Supt DATE 8-31-83

G. E. Tate

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 7 1983

\*See Instructions on Reverse Side