

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 ☐
well 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 Sec. 21

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) ☐

5. LEASE

NM-13644A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Featherstone Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Featherstone-Bone Spring

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

Section 21, T20S, R35E

12. COUNTY OR PARISH

Lea

13. STATE

NM

14. API NO.

3716' GR

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

(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.)*

Proposal to Abandon Bone Spring and Recomplete to San Andres

1. Set CIBP @ 10,500' w/35' cmt on top.
2. Perf 4 sq holes @ 8500', set cmt retainer @ 8350', pmp 120 sx Class H Neat cmt.
3. Perf 4 sq holes @ 6290', set cmt retainer @ 6140, pmp 150 sx Class H Neat cmt.
4. Perf 4 sq holes @ 5500', set cmt retainer @ 5480', pmp 187 sx Class C Cmt (contains 50% excess) w/4% CFR-2 Turbulence Inducer. Follow w/20 sx Class C cmt w/2% Ca Cl2.
5. Perf San A dres zone 5282-5410' (total of 90 holes using 4" gun).
6. Acidize w/6000 gals 15% HCL + 1000 SCF/bbl of N2. Swab, recover load.
7. Frac w/52,000 gals gelled crosslinked KCL frac fluid w/120,000# 20/40 mesh sand.
8. SION, swab, put well on production.

Note: Replaces procedure dated 8-8-84.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED

TITLE Division Opr. Supt DATE 9-18-84

G. F. Tate

(This space for Federal or State office use)

APPROVED BY

TITLE CARLSBAD RESERVE AREA

DATE

9-25-84

CONDITIONS OF APPROVAL, IF ANY: