Form 9-331 Dec. 1973

1. oil

well

below.)

AT SURFACE:

AT TOTAL DEPTH:

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

AT TOP PROD. INTERVAL:

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** 

gas

well

Anadarko Production Company

P.O. Box 806 Eunice, New Mexico 88231

## ', M. CR COLO. CALMISSIN P. O. EGM 1810 HORBS, HEW MEXICO 88240

Form Approved. Budget Bureau No. 42-R1424

5. LEASE MINI DE TAG

3583.4 GR

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.)

4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.

10' FSL & 660' FWL

otherWater Injection Well

XX SUBSEQUENT REPORT OF:

NM 03146
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME Teas Yates Unit
8. FARM OR LEASE NAME Tract # 13
<b>9.</b> WELL NO. 2
10. FIELD OR WILDCAT NAME Teas
11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA
Sec 11, Twp 20S, Rg 33E  12. COUNTY OR PARISH 13. STATE
14. API NO.
15. FLEVATIONS (SHOW DE KOR AND WO

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

ABANDON\* M. 7 248 (other) Run surface pipe & cement 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.)\*

MAY 13 1983

1. MIRURT. Spudded 124" hole @ 2:30 PM 4-19-83.

2. Drilled 124" surface hole to 1419' @ 1:30 PM 4-21-83.
3. Ran 35 jts (1403') of used 47#, S-95, LT&C Rg 3, 9-5/8" csg, w/guide shoes, Float collar & 3 centralizers.

4. Cemented w/550 sx Class "C" cement w/2% CACL. Plug down @ 7:50 PM 4-21-83. Circ 78 sx to pit.

5. Install BOP & test to about 1000# for 30 min. Tested OK.

6. WOC about 18 hrs. Resume drlq w/81/2" bit.

Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct Original Thursday Declary TITLE Field Foreman	DATE May 4, 1983
ACCEPTED FOR RECORD space for Federal or State office use)  APPROVED BY (ORIG: SGD.) DAVID R. GLASS CONDITIONS OF APPROVALANT ASYL 1000	
CONDITIONS OF APPROVMAN AND 1983	DATE