Doc. 1973	Budget Bureau No. 42-R1424
OUILED TIVIES D V : 15 - 10 - 2	8. LEASE
DEPARTMENT OF THE INTERIOR THEY HAVE	20 88240 NM-17439
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	8. FARM OR LEASE NAME
1. oil G gas G	Tonto Federal
well well other	9. WELL NO.
2. NAME OF OPERATOR	11
Siete Oil & Gas Corporation	10. FIFLD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Teas - Bone Springs
P.O. Box 2523, Roswell, NM 88201	11. SEC., T., R., M., QR BLK. AND SURVEY OF
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	
below.) SE/4 NE/4	Sec: 10, T-20-S, R-33-E
AT SURFACE: 1980' FNL, 660' FEL AT TOP PROD. INTERVAL: same	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH: same	I HEM TRAILED
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	14. API NO. 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	3576' GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3376 GR
TEST WATER SHUT-OFF	
FRACTURE TREAT	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.
MULTIPLE COMPLETE	
CHANGE ZONES	
ABANDON* 🔯 🗍	
A Mary Park.	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly sta 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 pertine	ent to this work.)*
	မျှားရှိမြေရှိသည်။
10/11/85 - Cast iron bridge plug set @ 3500'	
Plugging Operations	
1 Cot 100 and annual 1 an from 25001 to 2	
<ol> <li>Set 100 sxs cement plug from 3500' to 3</li> <li>Set 40 sxs cement plug from 1600' to 15</li> </ol>	
<ol> <li>Set 40 sxs cement plug from 1600' tp 15</li> <li>Set 40 sxs cement plug from 3751 to 475</li> </ol>	
4. Set 20 sxs cement plug from 50' to surf	Face
5. Install dry hole market @ surface	
way note marker & parrace	
(verbal approval from Bob Pitschke) Notify V	Vince Valdez prior to PAA
Subaudana Cafak Malau M	
Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct	1 3 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5
$A \cap A \cap A$	DATE 12/11/85
SIGNED Harvis Dentition Supervisor	DATE
Ong . Cyl. / Cor S. Dollar (This space for Federal or State of	fice use)
APPROVED BY TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	

No Color