

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 ☐ other ☐  
well well
2. NAME OF OPERATOR  
Dallas McCasland
3. ADDRESS OF OPERATOR  
P. O. Box 763
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FNL & 660' FEL Sec. 7  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
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) Plug off Grayburg Zone |                          |                       | <input checked="" type="checkbox"/> |

5. LEASE  
LC-032573 (b)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Elliott
9. WELL NO.  
2
10. FIELD OR WILDCAT NAME  
Eumont
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 7, T22S, R37E
12. COUNTY OR PARISH  
Lea
13. STATE  
N. M.
14. API NO.
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.)\*

4/24/84 Pull rods and tubing. Dump 2 sacks cement on bottom with dump bailer. WOC 2 hours, tag top of plug at 3697. Dump 2 sacks cement with dump bailer. WOC 2 hours, tag top of plug at 3692. Mr. O. W. Wink with Oil Conservation Division approved plug back total depth of 3692 sufficient to cover Grayburg section.

4/25/85 Pump 58 bbls oil, 4 bbls water, 230 MCF gas 24 hours.

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

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

SIGNED Donna Dallas TITLE Agent DATE 4/26/84

(This space for Federal or State office use)

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

MAY 7 1984

\*See Instructions on Reverse Side

ROSWELL, NEW MEXICO

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RECEIVED  
JUL 10 1967  
U.C.C.  
HOBBS OFFICE