

UNITED STATES OF AMERICA  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

P.O. BOX 1930

HOBBS, NEW MEXICO 88240

5. LEAS

NM 0552659 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
CURRY FEDERAL9. WELL NO.  
TWO10. FIELD OR WILDCAT NAME (UNDESIG.  
ANTELOPE RIDGE-MORROW GAS)11. SEC., T., R., M., OR BLK. AND SURVEY OR  
AREA  
SEC. 22, T23S, R34E12. COUNTY OR PARISH 13. STATE  
LEA NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3476' GL

## 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 ☒ other2. NAME OF OPERATOR  
ESTORIL PRODUCING CORPORATION3. ADDRESS OF OPERATOR  
11th floor, Vaughn Bldg.4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FSL & 1830' FWL of Sec.  
AT TOP PROD. INTERVAL: 22  
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 checked="" 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)                  | <input type="checkbox"/> |                       | <input type="checkbox"/>            |

(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.)\*

9-14-82 Set Cast Iron Bridge Plug on Wire Line @ 7030', capped w/ cement using dump bailer, perforated 7 5/8" casing w/ one shot per foot from 6876'-6895', acidized perforations w/ 3000 gallons of 7.5% NeFe acid &amp; 30 ball sealers.

9-17-82 Squeezed w/ 300 sacks class 'C' cement .5 of 1% CFR<sub>2</sub>.

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

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

SIGNED K. B. Dailish TITLE Prod. Clerk DATE 9-20-82

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF

PETER W. CHESTER

TITLE

DATE

APPROVAL IF ANY:  
SEP 29 1983

\*See Instructions on Reverse Side

RECEIVED

OIL & GAS  
MINERALS MGMT. SERVICE  
ROSWELL, NEW MEXICO