

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 well ☐ gas well ☐ other Ta'd

2. NAME OF OPERATOR

Sun Exploration and Production Co.

3. ADDRESS OF OPERATOR

P.O. Box 1861, Midland, Texas 79702

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: Unit Ltr. "C"

AT TOP PROD. INTERVAL: 660' FNL and 2310' FWL

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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON\* ☐

(other) repair csg. leak and test

5. LEASE

LC 054668

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Farnsworth 4

9. WELL NO.

9

10. FIELD OR WILDCAT NAME

Langlie Mattix 7 Rvrs. Q. Gryb.

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

Sec. 4, T-26-S, R-37- E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

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.)\*

1) MIRU WO rig. Install BOP. RIH w/RBP on 2 3/8" WS. Set RBP at 275'.  
Dmp. 10' sand on RBP. Load hole w/field wtr.

2) Repair csg. leak 20" below tbg. flange by welding patch over csg. hole.

3) RIH w/cmt ret. on WS. Set ret. at 190'. Hall. Sqz. csg. leak w/50 sxs "C" w/0.3%Halad 4 followed by 100 sxs. "C" w/3lb. salt. POH w/WS.

4) RIH w/ bit and DC's. DO cmt ret and cmt. to top of sand on RBP. POH w/ DC's and bit.

Test-sqz. to 500 PSI. Re-Sqz. as before if szq does not hold.

5) RIH w/ret. head on WS. Wash sand from top of RBP. Retrieve RBP. POH w/ Ws and RBP.

6) Remove BOP. NU wellhead.

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

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

SIGNED Peter W. Chester TITLE Acct. Asst. II DATE 6-1-83

**APPROVED**

(This space for Federal or State office use)

APPROVED BY Peter W. Chester

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

**JUN 30 1983**