Form 9-331	Form ⊯pproved. Budget Bureau No. 42-R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	N1-740658 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
GEOLOGICAL SURVEY	6. IF ESDIAN, ALLOTTEE OR TRIDE 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
	Buckskin Federal
well well other Dry Hore	9. WELL NO. 3
2. NAME OF OPERATOR Alpha Twenty-One Production Company	10. FIELD OR WILDCAT NAME Dollarhide-Tubb Drinkard
3. ADDRESS OF OPERATOR P.O. Box 1206, Jal, NM	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.) 1650' FSL & 1980 FWL AT SURFACE:	Sec. 18, T-24-S, R-38-E 12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Lea New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3131' GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF	
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9- 330.)
ABANDON*	
(other) Casing Test	
 DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stating including estimated date of starting any proposed work. If well is of measured and true vertical depths for all markers and zones pertine 	irectionally drilled, give subsurface locations and
Work commenced and completed May 24, 1984.	
As per request from BLM plug was set as	nd casing was tested as follows:
Set CIBP @ 4950'. Pumped four sx ce	
to fill casing with water and pressu Casing test was successful and was w	
sasing test was successful and was t	vithess by bhn teptesentative.
Subsurface Safety Valve: Manu, and Type	Set @ Ft
18. I herepy certify that the foregoing is true and correct	
Inchard I mill current	ntendentre
SIGNED MIChae' ACCOPPED FOR REORD Inhis space for Federal or State of This space for Federal or State of State	free use)
	miceuse)
CONDITIONS OF APPROVACE D' 1 1984	UAIt
JLF 2 1 1304	
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(2. Lalad', NEW ABAICO'See Instructions on Reverse Side