

N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO

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

2. NAME OF OPERATOR
Alpha Twenty-One Production Company

3. ADDRESS OF OPERATOR
P.O. Box 1206, Jal, NM 88252

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 330' FEL & 2310' FSL, S17-T24S-R39E
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) Cancellation APD		

533149E NM 17252	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Colvin Federal	
9. WELL NO. 2	
10. FIELD OR WILDCAT NAME Tex-Mex San Andres	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17-129S-R39E	
12. COUNTY OR PARISH Lea	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 3537.05' GL	

(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.)*

A cancellation of Application for Permit to Drill on this well
is respectfully requested.

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

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

SIGNED Michael D. Oney TITLE Drilling Super. DATE 9-1-83

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY (ORIG. SCD.) DAVID R. GLASS DATE
CONDITIONS OF APPROVAL SEP 20 1983

ROSWELL, NEW MEXICO

RECEIVED
SEP 22 1983
O.C.D.
HOBBS OFFICE