

OIL CONSERVATION DIVISION
RECEIVED

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

SF078357-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

J.Q. Marshall No. 4

9. API Well No.

3004528683

10. Field and Pool, or Exploratory Area

Basin Fruitland Coal

11. County or Parish, State

San Juan Co., NM

093 JUL 7 AM 9 20
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Texaco Exploration and Production Inc.

3. Address and Telephone No.

3300 North Butler, Farmington, New Mexico 87401 (505) 325-4397

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

790' FSL and 1820' FWL, Sec. 1, T27N, R9W

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION:

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Re-issue C102
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of recompletions on Well Completion or Recompletion Report and Log form.)

13. 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.)

Re-issue C102 to show graded elevation of location.

RECEIVED

JUN 3 0 1993

OIL CON. DIV.
DIST. 3

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

Signed [Signature]

Title Area Manager

Date 6-22-93

(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval, if any: