

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form Approved.  
Budget Bureau No. 42-R1424

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

JOEL B. BURR, JR.

3. ADDRESS OF OPERATOR

87401

Suite 300, 300 W. Arrington, Farmington, NM

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

AT SURFACE: 990' FNL & 2310' FWL

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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON\* ☐

(other) CHANGE OF OPERATOR.

5. LEASE

NM 15646

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

N/A

8. FARM OR LEASE NAME

ROBINSON-COLEMAN

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

FRANCISCAN LAKE MESA VERDE

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

SEC. 13, T20N, R6W

12. COUNTY OR PARISH

McKINLEY

13. STATE

NEW MEXICO

14. API NO.

15. ELEVATIONS (SHOW DE KDB AND WD)

6760 GL

RECEIVED

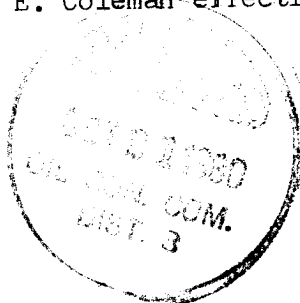
(NOTE: Report results of multiple completion or zone change on Form 9-331-C)

U. S. GEOLOGICAL SURVEY

Instructions

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.)\*

This is to advise that Joel B. Burr assumed operations of the Robinson Coleman No. 1 well from George E. Coleman effective Sept. 11, 1980.



Subsurface Safety Valve: Manu. and Type

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

SIGNED

JACK D. COOK

TITLE

AGENT

DATE

October 9, 1980

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: