

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
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: 330' FNL & 2310' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE NO. 15646
NM - 45846

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.
2

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)
6758 GL

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

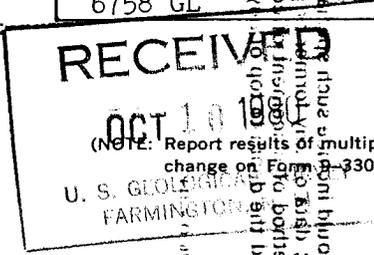
PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON*

(other) CHANGE OF OPERATOR



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.2 well from George E. Coleman effective Sept. 1, 1980.

Subsurface Safety Valve: Manu. and Type _____ Ft.

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

SIGNED JACK D. COOK TITLE AGENT DATE OCT 10 1980

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

at Burr