

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
WTR OIL COMPANY

3. ADDRESS OF OPERATOR
DRAWER LL - CORTES CO. 81321

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 330' FSL + 350' FEL
AT TOP PROD. INTERVAL: SAME
AT TOTAL DEPTH: SAME

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) RE SEEDING	

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.)*

RESEEDED LOCATION WITH BLM SEED MIXTURE #2

NORDAN CRESTED WHEATERASS	- 4.50 PLS #
4-WING SALT BRUSH	3.00 PLS #
SAND DROPSEED GRASS	.75 PLS #
INDIAN RICE GRASS	3.00 PLS #
WESTERN WHEATERASS	3.00 PLS #

USING A DISC, CYCLONE HAND SEEDER - AND HARROW.

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

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

SIGNED Lee E. Seary TITLE Manager DATE 8-9-84

(This space for Federal or State office use)

APPROVED _____
CONDITIONS OF APPROVAL _____

TITLE _____ DATE _____

RECEIVED
AUG 16 1984
OIL CON. DIV.
DIST. 3

*See Instructions on Reverse Side

NMOCC

ACCEPTED FOR RECORD

AUG 15 1984

FARMINGTON RESOURCE AREA

BY 843