

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  
W. B. Martin & Associates, Inc.
- 3. ADDRESS OF OPERATOR  
2110 North Sullivan, Farmington, NM 87401
- 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1750' FSL and 1550' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
- 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE  
Contract #398

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Martin-Florance

9. WELL NO.  
#3

10. FIELD OR WILDCAT NAME  
Ballard Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
NE SW 15  
T23N R4W

12. COUNTY OR PARISH  
Rio Arriba

13. STATE  
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
GR. 7214

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF
- FRACTURE TREAT
- SHOOT OR ACIDIZE
- REPAIR WELL
- PULL OR ALTER CASING
- MULTIPLE COMPLETE
- CHANGE ZONES
- ABANDON\*
- (other)

SUBSEQUENT REPORT OF:

RECEIVED  
OCT 14 1983  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

RECEIVED

OCT 21 1983

OIL CON. DIV.

DIST. 9

- 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.)\*

Request a Six month drilling extension.

*extended to 4/18/84*

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

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

SIGNED W.B. Martin TITLE Operator DATE 10/15/83

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCC

APPROVED

OCT 19 1983

*R. B. Ingram*

AREA MANAGER  
FARMINGTON RESOURCE AREA