UNITE	ED S	STATE	:S
DEPARTMENT	OF	THE	INTERIOR
CENTUC	ICAI	SHE	VFY

	Jicarilla Apache			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT NAME			
eservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME Martin-Florance			
1. oil gas other Commingled	9. WELL NO. #13 10. FIELD OR WILDCAT NAME			
2. NAME OF OPERATOR W.B. Martin & Associates, Inc.				
3. ADDRESS OF OPERATOR 2110 N Sullivan, Farmington, New Mexico 87401	S. Lindrith Gallup-Dakota extension			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR  AREA NE NE Sec. 8  T23N R4W			
below.) AT SURFACE: 880' FNL and 680' FEL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Rio Arriba New Mexico			
AT TOTAL DEPTH:  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.			
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 7014' GR			
REQUEST FOR APPROVAL TO:  SUBSEQUENT REPORT OF:  FRACTURE TREAT  SHOOT OR ACIDIZE  REPAIR WELL  PULL OR ALTER CASING  MULTIPLE COMPLETE  CHANGE ZONES  ABANDON*  (other) Mancos Zone  SUBSEQUENT REPORT OF:  SUBSEQUENT REPORT OF:  RECE!  RECE!  SEP 27  SEP 27  BUREAU OF LANGE  BUREAU OF LANGE  BUREAU OF LANGE  FARMINGTON RE	1983 19 NOTE: Report results of multiple completion or zone OF THE PROPERTY OF			

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.)\*

> Abandon Mancos -non-producted zone squeezed off Perf's 5024' KB to 5103' KB with 100 sacks RFC 10-2 cement "Dowell"



porm Approved.

#362 6. IF INDIAN, ALLOTTEE OR TRIBE NAME

5. LEASE

Budget Bureau No. 42-R1424

OIL CON. DIV.

				DIS1. 3
Subsurface Safety Valve: Man	u. and type		Set @	Ft.
18. I hereby certify that the fo	pregoing is true and correct			
SIGNED Thereby	THE Operator Rep	DATE Ser	otember 10. 1	983
	(This space for Federal or State of		APPRO	
APPROVED BY CONDITIONS OF APPROVAL. IF	ANY:	DATE		9 1 - 1 - 1
			DEF. 27	
	*See Instructions on Reverse	Side	1- Duy	haur
	MMOOQ		FARMINGTON RES	OURCE AREA