UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR Contract_#362/ 6. IF INDIAN, ALLOTTEE OR TRIBE NAME GEOLOGICAL SURVEY <u> Jicarilla Apache</u> 7. UNIT AGREEMENT NAME 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.) 8. FARM OR LEASE NAME well other Co-mingled weil 9. WELL NO. #23 Martin-Whittaker 2. NAME OF OPERATOR 10. FIELD OR WILDCAT NAME W.B. Martin & Associates, Inc. Wildcat. 3. ADDRESS OF OPERATOR 11. SEC., T., R., M., OR BLK. AND SURVEY OR 2110 N Sullivan, Farmington, NM 87401 AREA NW1/Sec. 7 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 T23N_R4W 12. COUNTY OR PARISH 13. STATE AT SURFACE: 1745' FNL and 1190' FWL AT TOP PROD. INTERVAL: <u> Rio Arriba</u> NM AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE RECEINSTERED tresults of multiple completion or zone REPAIR WELL change on Form 9-330.) PULL OR ALTER CASING FEB 27 1984 MULTIPLE COMPLETE CHANGE ZONES BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA (other)ase & Cement Surface 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.)* Completed Operation 02/22/84 Drill 12½" hole to 280' with Spud Mud. Run 269' of new J-55 32#/ft 9 5/8"OD casing. Cement with 206.50ft³ (175sxs) Class E 2% CaCl₂. Circulate Cement to surface. Proposed Operation-WOC 12hrs. MAR 31 1984 OIL CON. DIV. DIST. 3 Subsurface Safety Valve: Manu. and Type Set @ ____

1. oil

ABANDON*

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY

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

*See Instructions on Reverse Side

(This space for Federal or State office use)

_ TITLE _Operator _____ DATE 02/23/84_____

NMOC**C**

ACCEPTED FOR RECORD

FFB 29 1984

FAKIMINGTUH MESUUNUE AREA BY Sam