Form 9–331
Dec. 1973

Form Approved.
Budget Bureau No. 42–R1424

# 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   Co-mingled

2. NAME OF OPERATOR
W.B. Martin & Associates, Inc.

3. ADDRESS OF OPERATOR
2110 N. Sullivan, Farmington, NM  87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE:  900'FSL and 1660'FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
Contract #398

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.
#30 Martin-Whittakerr

10. FIELD OR WILDCAT NAME
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA   SWSE Sec. 15
T23N R4W

12. COUNTY OR PARISH   Rio Arriba
13. STATE   NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
7242' GR

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)  Case & Cement Surface | | |

RECEIVED

(NOTE: Report results of multiple completion or zone change on Form 9–330.)

MAY 2 4 1984

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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:   Drilled $12\frac{1}{2}$" hole to 268' with spud mud.  Ran 268' of new J-55 32#/ft 9 5/8" casing.  Cemented with $206.50ft^3$ Class B 2% $CaCl_3$.  Circulated cement to surface.

Proposed Operation:  Wait on Cement 12hrs.

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OIL CON. DIV.
Set DIST. 3     Ft.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED _William B. Martin_  TITLE _Operator_  DATE _5/23/84_

(This space for Federal or State office use)

APPROVED BY _____  TITLE _____  DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

JUN 0 5 1984

FARMINGTON RESOURCE AREA

BY _____  Smw