

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:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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) Case and Cement Liner

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

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

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.)*

Completion Operations: 6/11/84

Drilled to T.D. 7240' with low solids/low water loss mud. RIH w/Texas Pattern Guide Shoe @ 7238'KB, Fill Collar @ 7194.35'KB, 47jts of new K-55, 4 1/2" 11.6#/ft casing, with Liner Hanger set @ 5259'KB. Cement with 316/ft³ 10-1 Thixaid w/.4% fluid loss additive.

Proposed Operation:

Wait on Completion Tools

RECEIVED
JUN 28 1984

OIL CON
DIST. 3

Subsurface Safety Valve: Manu. and Type _____ Ft.

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

SIGNED William B. Martin Jr TITLE Operator DATE 6/11/84

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

JUN 27 1984

*See Instructions on Reverse Side

NMOCO

FARMINGTON RESOURCE AREA
BY Smn