UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR Contract/# 6. IF INDIAN, ALLOTTEE OR TRIBE NAME **GEOLOGICAL SURVEY** Jicarilla Apache 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 gas well 🖾 Co-mingled other well 9. WELL NO. 2. NAME OF OPERATOR #50 Martin-Whittaker 10. FIELD OR WILDCAT NAME W.B. Martin & Associates, Inc. h Callup-Dakote Ext. 3. ADDRESS OF OPERATOR 709 North Butler, Farmington, NM 87401 11. SEC., T., R., M., OR BLK. AND SURVEY OR NE'/4AREA SW 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 Sec. 14/T23N/R AT SURFACE: 940' FNL and 1700' FEL 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: Rio Arriba 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) 6755' GR REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone PULL OR ALTER CASING | 1934 | change on Form 9–330.) | MULTIPLE COMPLETE BURLAU OF LAND PHANCALMENT MARMINGTON PEROLECE AREA CHANGE ZONES ABANDON* (other) Case & Cement Intermediate 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 Operations: 9/20/84 Drilled 8 3/4" hole to 4555 with low solids/ low water loss mud. Ran 111jts of new J-55 23#/ft 7" Casing. G.S. @ 4554'KB, F.C. @ 4512'KB, D.V. Tool @ 2912'KB. Cemented first stage w/250.8ft3 50/50 poz w/additives. Tail in 59ft³ Class B 2%CaCl₂. Cement 2nd stage w/290.4ft³ 50/50 poz w/additive. Tail in 59ft³ Class B 2% CaCl₂. Cement Top @ 1650'KB. Proposed Operation: WCC 12hrs. Set @ OIL CO Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct Martin TITLE Operator Rep. DATE FPTED FOR RECORD

*See Instructions on Reverse Side

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

SEP 26 1984

DATE