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Form 9-331

BUREAU OF LAND MANAGEMENT

Form Approved

	Dec. 1973 FARMINGTON RESOL	RCE AREA Budget Bureau No. 42-R1424
	UNITED STATES	5. LEASE SF-078359
	DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE 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	7. UNIT AGREEMENT NAME
	1. oil gas well well other	8. FARM OR LEASE NAME MARCUS "A"
	2. NAME OF OPERATOR	9. WELL NO. #1
	JACK A. COLE 3. ADDRESS OF OPERATOR P. O. ROY 101 EARNINGTON N. N. 67400	10. FIELD OR WILDCAT NAME COUNSELOR'S GALLUP-DAKOTA
	P. O. BOX 191, FARMINGTON, N.M. 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SUPERCE: 14501 FCL 4401 FCL	SECTION 8-T23N-R6W
	AT SURFACE: 1650' FSL, 660' FWL AT TOP PROD. INTERVAL: SAME AT TOTAL DEPTH: SAME	12. COUNTY OR PARISH 13. STATE RIO ARRIBA NEW MEXICO 14. API NO.
	16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6824' GR, 6838' KB
	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)	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
	17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stating including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertine	directionally drilled, give subsurface locations and
9/13/85	SPUD 12-1/4" HOLE - RAN 6 JTS. 8-5/8", 24.0 L 270'. CEMENTED WITH 250 SACKS (295 CU. FT.) FLOCELE PER SACK. PLUG DOWN 11:00 P.M. CIRC	CLASS "B". 3% CACL AND 1/4 IB.
9/14/85	PRESSURE TEST CASING TO 500 PSI FOR 15 MINUTE	
		SEP 2 6 1888
		OIL CON. DIV.
	Subsurface Safety Valve: Manu. and Type	Set @ Ft.
	18. I hereby certify that the foregoing is true and correct	
	SIGNED Down you Ble nee to TITLE PROD. SUPT.	DATE SEPTEMBER 17, 1985
	(This space for Federal or State office use)	
	APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
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