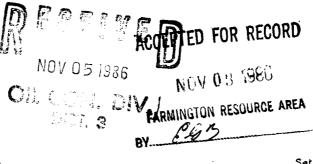
Form	9-331
Dec.	1973

	Form Approved. Budget Bureau No. 42–R1424
1	5. LEASE
	SF-0783 <b>6</b> ⁄2
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNT AGREEMENT NAME
	7. OMIT AGREEMENT NAME
it	8. FARM OR LEASE NAME
_	Marcus
	9. WELL NO.
_	7
_	10. FIELD OR WILDCAT NAME Lybrook Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR
<del>_</del>	AREA SESW
	Sec. 1-T23N-R7W
İ	12. COUNTY OR PARISH 13. STATE
	Rio Arriba New Mexico
_	14. API NO.
•	
	15. ELEVATIONS (SHOW DF, KDB, AND WD) $7022'~GR~7034'~KB$
-	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
	NAGEMENT PRCE AREA
di	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and t to this work.)*
t	o recover frac oil.
	ED FOR RECORD
- Allei	NOV 03 1980
f	

Dec. 1973		Budget Bureau No. 42-R1424		
UNITED S DEPARTMENT OF		5. LEASE		
GEOLOGICAL		SF-078362  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		
reservoir. Use Form 9-331-C for such propos	8. FARM OR LEASE NAME			
1. oii gas uther		Marcus		
2. NAME OF OPERATOR		7		
Jack A. Cole 3. ADDRESS OF OPERATOR		10. FIELD OR WILDCAT NAME Lybrook Gallup		
P.O. Box 191, Farmington, N.M. 87499  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SESW		
below.)	· ·	Sec. 1-T23N-R7		
AT SURFACE: $640'$ FSL, $20'$ AT TOP PROD. INTERVAL: $San$	105' FWL	12. COUNTY OR PARISH	13. STATE New Mexico	
AT TOTAL DEPTH: San		14. API NO.		
16. CHECK APPROPRIATE BOX TO REPORT. OR OTHER DATA	INDICATE NATURE OF NOTICE.		- <del></del>	
REPORT, OR OTHER DATA		15. ELEVATIONS (SHOW 7022' GR	DF, KDB, AND WD) $7034'~KB$	
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF	SUBSĘQUENT REPORT OF:			
SHOOT OR ACIDIZE RECEIVED				
REPAIR WELL PULL OR ALTER CASING  MULTIPLE COMPLETE CHANGE ZONES	OCT 15 19	(NOTE: Report results of me change on Form 9-	·	
ABANDON*   (other) See Below	BUREAU OF LAND MA			

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

Gas first delivered. Producing 10-10-86



Subsurface Safety Valve: Manu. and Type		<u>.</u>	Set @ !	t.
18. I hereby certify that the foregoing is true signed Downston Blance H.	and correptroduction TITLE Superintendent	DATE _	October 13, 1986	_
m	nis space for Federal or State office use)			
APPROVED BY	TITLE	DATE		