Form 9–331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

GEOLOGICAL SURVEY

Form approved.
Budget Bureau No. 42–R1424.

5. LEASE DESIGNATION AND SERIAL NO

NM-24455A

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 "APPLICATION FOR PERMIT—" for such proposals.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1.
OIL WELL ☒ GAS WELL ☐ OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR

Filon Exploration Corporation

3. ADDRESS OF OPERATOR C/o Mininerals Management
501 Airport Drive, Suite 210, Farmington, NM 87401

8. FARM OR LEASE NAME

Federal 33

9. WELL NO.

4

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

2220' FSL, 2310' FWL, Sec. 33, T21N, R5W

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 33, T21N, R5W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6886 DF

12. COUNTY OR PARISH

Sandoval

13. STATE

NM

16.
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO :

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other)	

SUBSEQUENT REPORT OF :

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) Surface Casing	☒

(NOTE : Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.) *

11-8-75   Spud 15" Hole 9:00 P.M.
11-8-75   Drilled 15" Hole to 245'. Ran 5 Jts. 223' 10 3/4 OD K-55 LT&C
          Casing. Set @ 237'. Cement with 200 sx. Class "B" with 2%
          CaCl. Plug down-5:45 A.M.
11-9-75   Circulated Cement.

NOTE: THIS IS A TIGHT HOLE

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

SIGNED _____

TITLE Drilling Manager
Minerals Management Inc DATE 11-10-75

(This space for Federal or State office use)

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

*See Instructions on Reverse Side