## UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

	Dudget Dureau 140. 42-1424				
	5. LEASE				
	N00-C-14-20-5051				
ı	6. IF INDIAN, ALLOTTEE OR TRIBE NAME				
-	Navajo				
	7. UNIT AGREEMENT NAME				
nt					
	8. FARM OR LEASE NAME				
	DOME NAVAJO 34-22-6				
	9. WELL NO.				
	1				
	10. FIELD OR WILDCAT NAME				
	Rusty Chacra Extension				
	11. SEC., T., R., M., OR BLK. AND SURVEY OR				
7	AREA				
	Sec. 34, T22N, R6W				
	12. COUNTY OR PARISH 13. STATE				
	Sandoval New Mexico				
	14. API NO.				
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SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a difference reservoir. Use Form 9–331–C for such proposals.) well well other 2. NAME OF OPERATOR DOME PETROLEUM CORP. 3. ADDRESS OF OPERATOR 501 Airport Drive, Suite 114, Farmington, New Mexico 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 1 below.) 820' FNL, 1830' FWL AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 7044' 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 change on Form 9-330.) MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other) Run Production Casing 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.)\* Ran 58 jts. (2281') 4½", 10.5#, K55, ST&C Casing. Casing landed at 2281' G.L. Cemented with 175 sxs. 65/35 Pozmix, 6% Gel, and 10# Gilsonite/sx. Followed with 125 sxs. Class "B" Cement with 2% CaCl. Plug down at 6:00 a.m., 12/12/80. Circulated cement. Rig released at 7:00 p.m., 12/11/80.

Subsurface Safety Valve: Manu. and Type			Set Set	Ft.
18. I hereby certify that the foregoing is to	rue and correct			
SIGNED ALL SHOLLENGSWORTH	ππ.eDrlg.&Proc	1.Foreman DATE1	2/12/80	
	(This space for Federal or S	State office use)		
APPROVE ACCEPTED FOR RECUISION OF APPROVAL, IF ANY:	TITLE	DATE		

ARMINGTON DISTRICT

See Instructions on Reverse Side