

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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.)

1. oil ☒ gas ☐ other ☐  
well well

2. NAME OF OPERATOR  
DOME PETROLEUM CORP.

3. ADDRESS OF OPERATOR 501 Airport Dr.,  
Suite 114, Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17  
below.)  
AT SURFACE: 830' FNL, 790' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) Spud & Set Surface 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.)\*

Spudded 12 $\frac{1}{4}$ " hole at 3:30 p.m., 1/10/81. Drilled to 244'. Ran 5 jts. (224')  
8 5/8", 24#, K55, ST&C Casing. Casing landed at 238' K.B. Cemented with  
200 sx. Class "B" Cement with 3% CaCl. Plug down at 12:30 a.m., 1/11/81.  
Circulated cement.

5. LEASE  
N00-C-14-20-5365

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Navajo Allotted

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Dome Tesoro #27

9. WELL NO.  
3

10. FIELD OR WILDCAT NAME  
Undesignated Gallup

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

Sec. 27, T22N, R7W

12. COUNTY OR PARISH 13. STATE  
Sandoval New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6781' GR

(NOTE: Report results of multiple completion or zone  
change on Form 9-330.)

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED H. D. HOLLINGSWORTH TITLE Dir. & Prod. Foreman DATE January 13, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

JAN 20 1981

NMOCC

\*See Instructions on Reverse Side

BY BA FARMINGTON DISTRICT