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

| 5. LEASE | |
|--------------------------------------|--|
| NM-21454 | |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |

| CLINIDDY | NOTICE | AND | REPORTS | ΛN | WELLS |
|----------|---------|-----|---------|----|--------|
| SUNDRY | NUTICES | AND | REPURIS | UN | 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.)

ХX other well 2. NAME OF OPERATOR JACK A. COLE

3. ADDRESS OF OPERATOR

FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE

(other) Extend Approved APD

REPAIR WELL

CHANGE ZONES

ABANDON*

P. O. Box 191, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 AT SURFACE: 1840'FSL, 1840'FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:

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

7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME Alamos Canyon 9. WELL NO. 15 10. FIELD OR WILDCAT NAME Wildcat 11. SEC., T., R., M., OR BLK. AND SURVEY OR

AREA Sec. 9-T21N-R6W

12. COUNTY OR PARISH 13. STATE Sandoval N.M.

14. API NO. 30-043-20554

15. ELEVATIONS (SHOW DF, KDB, AND WD) 6829 'GL

SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF RECEIVED

MAR 03 100 (NOTE: Report results of multiple completion change on Form 9–30.) MAR 8

U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent details, and give pertines, 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.)*

It is requested that the approved Application For Permit to Drill (APD), due to expire on March 24, 1982, be extended for an additional 6 month period.

Set @ _____ Ft. Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct ORIGINAL SIGNED BY TITLE President DATE March 2, 1982 (This space for Federal or State office use) DATE _ TITLE APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

