

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 well ☐ gas well ☒ other

2. NAME OF OPERATOR  
JACK A. COLE

3. ADDRESS OF OPERATOR  
P. O. Box 191 Farmington, N.M. 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1520'FNL, 1520'FEL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐

(other) See Below

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
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☐  
☐

RECEIVED

OCT 18 1982

U. S. GEOLOGICAL SURVEY

5. LEASE  
Contract No. 358

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Indian Bend "A"

9. WELL NO.

2

10. FIELD OR WILDCAT NAME  
Ballard Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 5-T22N-R2W  
N.M.P.M.

12. COUNTY OR PARISH  
Sandoval

13. STATE  
New Mexico

14. API NO.  
30-043-20636

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
7396'G.L.

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.)\*

Casinghead Gas First Delivered 10/13/82

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.  
FOR: JACK A. COLE

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

SIGNED Dwight Blumett Walsh Engr. &  
Production Foreman TITLE Production Corp. DATE 10/18/82

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

\*See Instructions on Reverse Side

OCT 18 1982

NMOCC

FARMINGTON  
BY smn