NM -/ 25/54 DEPARTMENT OF THE INTERIOR 6. WINDIAN, ALLOTTEE OR TRIBL NAME GEOLOGICAL SURVEY ク、UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plup back to a different reservoir. Use form 9-331-C for 3N6用 pagion4字。 B. FARM OR LEASE NAME PENISTAJA gas 1. oil \square 9. WELL NO other well well #6-13 2. NAME OF OPERATOR 10., FIELD OR WILDCAT NAME JACK A. COLE UNDESIGNATED GALLUP 3. ADDRESS OF OPERATOR 11. SEC., T., R., M., OR BLK. AND SURVEY OR P. O. BOX 191, FARMINGTON, N.M. AREA 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 SEC.6-T20N-R3W below.) 12. COUNTY OR PARISH 13. STATE 800' FWL AT SURFACE: 400' FSL. NEW MEXICO SANDOVAL AT TOP PROD. INTERVAL: SAME AT TOTAL DEPTH: SAME 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, 15. ELEVATIONS (SHOW DF, KDB, AND WD) REPORT, OR OTHER DATA 6964' KB 6952' GR SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF RECEIVED FRACTURE TREAT SHOOT OR ACIDIZE (NOTE: Report results of multiple completion or zone REPAIR WELL change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE UREAU OF LAND MANAGEMENT CHANGE ZONES ABANDON* (other) CASING & CEMENT SUMMARY 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.)* SEE ATTACHED MAR 11 1985 OIL CON. DIV. Set @ _ Subsurface Safety Valve: Manu. and Type 18. Thereby certify that the foregoing is true and correct _ DATE _ (This space for Federal or State office use) APPROVED BY _ TITLE . CONDITIONS OF APPROVAL, IF ANY: ACCEPTED FOR RECORD

*See Instructions on Reverse Side

FEB-28 1965

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