

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. Jic. Contract 434
2. NAME OF OPERATOR Mallon Oil Co.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache Tribe
3. ADDRESS OF OPERATOR c/o KM Production, P.O. Box 2406, Farmington, NM 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 790' FNL & 790' FWL	8. FARM OR LEASE NAME Jicarilla 434 G
14. PERMIT NO.	9. WELL NO. #1
	10. FIELD AND POOL, OR WILDCAT Undesig. Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 6, T22N, R4W
15. ELEVATIONS (Show whether of, to, or from) 6807' GL	12. COUNTY OR PARISH FARMINGTON RESOURCE AREA
13. STATE	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud; cement surf. csg.	(Other) <input checked="" type="checkbox"/>
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

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.)*

Spud well at 9:00 p.m. 12/15/86. Drill 12-1/4" hole to 202 ft. Run 182.5 ft. of 8-5/8", 24 #/ft. J-55 casing set at 198' RKB. Wait one hour on Dowell. Cemented surface casing with 125 sacks (148 ft.³) of Class B cement with 3% CaCl₂; good circulation throughout job. Circulated cement to the surface. Plug down at 7:00 a.m. 12/16/86. WOC

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

SIGNED <i>Kenn H. McLeod</i>	TITLE Agent	DATE 12/17/86
(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

ACCEPTED FOR RECORD

DEC 18 1986

*See Instructions on Reverse Side

NMOC

FARMINGTON RESOURCE AREA

BY