5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR GFOLOGICAL SURVEY

GEOLOGICAL SURVEY			6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Contract #12			
SUNDRY N	IOTICES AND RE	PORTS ON WELLS	7. UNIT AGREE	MENT NAME	•	
Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9~331–C for such proposals.)			8. FARM OR LEASE NAME			
1. oil gas X other			Jicarilla Otero 9. WELL NO.			
2. NAME OF OP	ERATOR		5			
Mobil Oil Corporation 3. ADDRESS OF OPERATOR 77046				10. FIELD OR WILDCAT NAME Basin Dakota		
3 Greenway Plaza E., Suite 800, Houston, TX			-1:	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 840' FNL & 1800' FWL, Sec. 28, AT TOP PROD. INTERVAL: T24N, R5W AT TOTAL DEPTH:			Sec. 28, T24N, R5W			
			12. COUNTY OR Rio Arrib		. STATE IM	
			14. API NO.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
REQUEST FOR APPROVAL TO: NOTICE, REPORT, OR OTHER DATA SUBSEQUENT REPORT OF:					<u></u>	
			15. ELEVATIONS 6648GR	SHOW DF	, KDB, AND WD)	
REQUEST FOR AF TEST WATER SHI	_	JBSEQUENT REPORT OF:		;		
RACTURE TREAT	=				-	
SHOOT OR ACIDI	ZE 📋					
REPAIR WELL PULL OR ALTER	CASING	H		sults of multipl n Form 9–330.;	le completion or zone)	
MULTIPLE COMPL	ETE					
CHANGE ZONES ABANDON*				· · · · · · · · · · · · · · · · · · ·		
(other) Log	g'run 5 ½" csg.	X		, i		
including esti	mated date of starting a d true vertical depths for Ran Ind. Comp. Ran 179 jts 5½" w/400x Lt. Wt. 11/3/77. Circ	TED OPERATIONS (Clearly state of the proposed work. If well is all markers and zones pertined.) N Density w/caliper 14# & 15.5# J55, s + 6½# Gilsonite + ½ 4 hrs w/full return 2 & ½# Flocele, PD 7	directionally drilled, ent to this work.)* 340'-7383'. et @ 7400'. # Flocele & 20 s. 2nd Stage	lst Stagooox C. 1: 895x	e: Cmtd PD 1:30 pm, Lt. Wt.	
}	y Valve: Manu. and Type			Set @	Ft	
1/.	fy that the foregoing is tr		cont 11	17177		
SIGNED WALL	- Jawarn	TITLE Authorized A	· · · · · · · · · · · · · · · · · · ·			
J		(This space for Federal or State of				
APPROVED BY CONDITIONS OF A	PPROVAL, IF ANY:	TITLE	DATE			