

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
Mobil Producing TX. & N.M. Inc.
3. ADDRESS OF OPERATOR
9 Greenway Plaza, Ste. 2700, Houston, TX 77046
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1739 FSL & 861 FWL
AT TOP PROD. INTERVAL: Same as surface
AT TOTAL DEPTH: same as surface
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) Set 4-1/2" csg.

SUBSEQUENT REPORT OF:

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5. LEASE
Santa Fe 078914
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Lindrith B Unit
9. WELL NO.
2
10. FIELD OR WILDCAT NAME
Chacon-Dakota Associated
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28, T24N, R3W
12. COUNTY OR PARISH
Rio Arriba
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
7001' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

1/15/80 - TD 7600' @ 8PM.

1/16/80 - Ran Ind El Log, CNL & Comp. Density.

1/17/80 - Ran 214 jts 4-1/2" (11.6 & 10.5# K55 csg.) set @ 7600'.
CMTD in 2 stages w/ DV tool set @ 6375. 1st stage: 100x
Lt. + 200 x B + 2% CaCl2. PD 5:30 AM. Circ. for 2nd stage.
2nd stage: Howco cmt 2nd stage through DV tool @ 6375 w/ 300x Lt +
50 x B Neat. PD @ 10AM. Cmt did not circ. Set slips, nipple down BOP'S
& clean pits. Ran temp. survey & showed TOG @ 4700'.

1/19/80 - Corr. TOC @ 3100:

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Robbie Jay TITLE Authorized Agent DATE March 27, 1980

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY: _____

TITLE _____ DATE _____

NMOCC

APR 9 1980

*See Instructions on Reverse Side

RECEIVED FOR RECORD
BY M. L. Kuchera