

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
SUPRON ENERGY CORPORATION
3. ADDRESS OF OPERATOR
P.O. Box 808, Farmington, New Mexico 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 860 ft./North; 1045 ft./West line
AT TOP PROD. INTERVAL: Same as above
AT TOTAL DEPTH: Same as above
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) ☐

SUBSEQUENT REPORT OF:

- ☒
☐
☐
☐
☐
☐
☐
☐

5. LEASE

Contract No. 10

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla "L"

9. WELL NO.

2-E

10. FIELD OR WILDCAT NAME

Otero Gallup
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 10, T-24N, R-5W, N.M.P.M.

12. COUNTY OR PARISH 13. STATE

Rio Arriba New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6461 KDB

(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. Spud 12-1/4" surface hole at 7:00 p.m. on 12-12-79.
2. Drill 12-1/4" hole to total depth of 281 ft. R.K.B.
3. Ran (6 jts.) 264 ft. of 2-5/8", 28.00#, H-40 S.T. & C casing landed at 278 ft. R.K.B.
4. Cemented with 200 sx of class "B" with 3% CaCl and 1/4# flo seal/sx. Cement circulated to surface. Plug down at 6:30 a.m. on 12-13-79.
5. W.O.C. 12 hours.
6. Pressure tested the casing to 1000 PSIG for 15 minutes. Pressure held OK.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

Rudy D. Motto
Rudy D. Motto

TITLE Area Supt.

DATE 12-17-79

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE