

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 Pl., Ste. 2700, Hous., TX 77046

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790 FSL & 1065 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*

SUBSEQUENT REPORT OF:

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-

(other) Set 8-5/8" & 4-1/2" csg. TD reached.

5. LEASE
Santa Fe - 078913

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Lindrith B Unit

9. WELL NO.
3

10. FIELD OR WILDCAT NAME
Chacon-Dakota Associated

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

Sec. 21, T24N, R3W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6927' 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.)*

4/2/80 - Ran 95 jts 8-5/8" csg. (40 jts 1682' 32# K55 + 55 jts 2228' 24# K55 STSC + 3 cmt. baskets). Cmt. @ 3905 w/ 475 x Lt + 200x B + 2% CaCl2. PD @ 2PM. Did not circ, but rec. cmt. Cut wtr. NU/test 1000 psi/OK.

4/13/80 - TD reached 7600 @ 4:30 AM. Circ/OK.

4/14/80 - Ran 205 jts 4-1/2" csg (69 jts 11.6#, 107 jts 10.5# K55 ST&C + 29 jts 11.6# K55) DV @ 6392. Cmt basket @ 6037 + 12 cents. Cmt @ 7598, 1st Stage: 150x Lt. + 200x B Neat + 2% CaCl2. PD @ 4:15. Circ 2 hrs. Cmt. circ. 2nd Stage: 350x Lt. + 50x B + 2% CaCl2. PD @ 8:15 PM. NU/test 1000 psi/OK. Rel. rig @ 6AM 4/15/80.

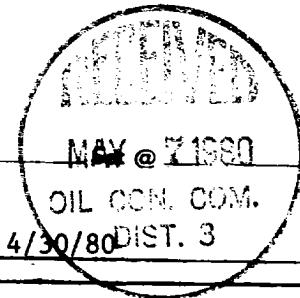
Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Robbie Jay TITLE Authorized Agent DATE 4/30/80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:



COPIED FOR RECORD

*See Instructions on Reverse Side

NMOCC

MAY 6 1980

WASHINGTON DISTRICT
BY M. L. Kuchera