ţ

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

	Budget Bureau No. 42-R1424		
i	5. LEASE		
	Santa Fe 078915		
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
	7. UNIT AGREEMENT NAME		
nt			
	8. FARM OR LEASE NAME		
	Lindrith B Unit		
	9. WELL NO. 4		
—	10. FIELD OR WILDCAT NAME		
,	Chacon-Dakota Associated		
6_	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA		
7	Sec. 34, T24N, R3W		
	12. COUNTY OR PARISH 13. STATE		
	Rio Arriba New Mexico		
	14. API NO.		
Ε,			
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 7037 GR		
	(NOTE: Report results of multiple completion or zone change on Form 9–330.)		
s di	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and t to this work.)*		

SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	8. FARM OR LEASE NAME
	Lindrith B Unit
1. oil gas	9. WELL NO.
2. NAME OF OPERATOR	4
Mobil Producing TX. & N.M. Inc.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Chacon-Dakota Associated
9 Greenway Plaza, Ste. 2700, Hou., TX 77046	11. SEC., T., R., M., OR BLK. AND SURVEY OF
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec. 34, T24N, R3W
AT SURFACE: 1840 FNL & 1840 FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: same as surface	Rio Arriba New Mexico
AT TOTAL DEPTH: same as surface	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	7037 GR
TEST WATER SHUT-OFF	(NOTE: Report results of multiple completion or zon change on Form 9–330.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertinent	irectionally drilled, give subsurface locations and
4/16/80 - Spud @ 8PM	
4/17/80 - Ran 7 jts. 13-3/8" csg.(48# H40 ST&C 3% CaCl2. PD @ Noon. Cmt. circ. N	
4/23/80 - Ran 90 jts. 8-5/8" csg.(36 jts. 1506 24# K55). Cmt @ 3889 w/550x Lt. + 1 Cmt. circ. NU/test BOP's 1000 psi/0	100x B Neat. PD @ 1:30 PM

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

Subsurface Safety Valve: Manu. and Type _____

TITLE Authorized Agent DATE April 29, 1980

(This space for Federal or State office use)

__ TITLE _

ACCEPTED FOR RECOND

_ DATE _

OIL CON. COM.

*See Instructions on Reverse Side

NMOCC

