PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*

(other) Temporary gas

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	5. LEASE Santa Fe 078915 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	7. UNIT AGREEMENT NAME
1. oil gas well other	8. FARM OR LEASE NAME Lindrith B Unit 9. WELL NO.
2. NAME OF OPERATOR Mobil Producing TX. & N.M. Inc.	4 10. FIELD OR WILDCAT NAME
 3. ADDRESS OF OPERATOR 9 Greenway Plaza, Suite 2700, Ho.,TX 77046 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 	Chacon-Dakota Associated 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
below.) AT SURFACE: 1840 FNL & 1840 FEL AT TOP PROD. INTERVAL: Same as surface	Sec. 34, T24N, R3W 12. COUNTY OR PARISH 13. STATE Rio Arriba New Mexico
AT TOTAL DEPTH: Same as surface 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO.
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	15. ELEVATIONS (SHOW DF, KDB, AND WD) 7037 GR
TEST WATER SHUT-OFF	(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.)*

Permission (in compliance with USGS regulations) is requested to lay temporary gas flowlines to the subject well until such time that permanent lines can be connected. the surface will not be disturbed. Permission has been secured from the landowners. the temporary lines will be removed when permanent connection is made.



Subsurface Safety Valve: Manu. a	nd Type	
18. I hereby certify that the foreg	oing is true and correct	
SIGNED Robbus Ja	TITLE Authorized	d Agent DATE <u>May 28, 1980</u>
	(This space for Federal or Sta	ate office use)
APPROVED BY	TITLE	DATE

NWOCC

APPROVED

*See Instructions on Reverse Side

ah Suh

CONDITIONS OF APPROVAL, IF ANY:

JAMES F. SIMS DISTRICT OIL & GAS SUPERVISOR