

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  
Robert L. Bayless  
3. ADDRESS OF OPERATOR  
P.O. Box 1541, Farmington, NM 87499  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 2020' FNL & 790' FWL  
AT TOP PROD. INTERVAL: same  
AT TOTAL DEPTH: same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  
TEST WATER SHUT-OFF ☐ ☐  
FRACTURE TREAT ☐ ☐  
SHOOT OR ACIDIZE ☐ ☐  
REPAIR WELL ☐ ☐  
PULL OR ALTER CASING ☐ ☐  
MULTIPLE COMPLETE ☐ ☐  
CHANGE ZONES ☐ ☐  
ABANDON\* ☐ ☐  
(other) Extension ☐ ☐

5. LEASE  
Jicarilla Contract 363  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Jicarilla  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Jicarilla 363 B  
9. WELL NO.  
#6  
10. FIELD OR WILDCAT NAME  
S. Blanco Pic. Cliffs  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 15, T24N, R4W  
12. COUNTY OR PARISH 13. STATE  
Rio Arriba NM  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6951' GL

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

JUL 03 1984  
OIL CON. DIV.  
DIST. 3

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.)\*

Please extend the Jicarilla 363 B #6 APD approval six months from the July 25, 1984 expiration date. Thank you.

extended to 1-25-85

RECEIVED

JUN 29 1984

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Robert L. Bayless TITLE Operator DATE June 28, 1984  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

