

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
Reading & Bates Petroleum Co.

3. ADDRESS OF OPERATOR
1125 17th St. Suite 2300 Denver, CO 80202

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 2310' FNL 2300' FEL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

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* ☐

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(other) Surface Casing

5. LEASE

SF 081347

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal / 7

9. WELL NO.

~~2~~ 2

10. FIELD OR WILDCAT NAME

West Lindrith-Gallup Dakota Pool

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

Sec. 17- T 24N, R 3W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

14. API NO.

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

6842 KB

(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.)*

Set surface casing. Ran 8 5/8" 24# K-55 ST&C set @ 386' KB.
Cemented w/ 350 sx Class "B" neat w/ 1/4#/sk flo seal and 2% CaCl.
Plug down @ 6:30 a.m. 12/16/80. Cement to surface.



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED David L. Blosser TITLE Petroleum Engineer DATE 1-5-81

(This space for Federal or State office use)

APPROVED ACCEPTED FOR RECORD TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

JAN 08 1981

FARMINGTON DISTRICT

2Y

*See Instructions on Reverse Side

NMOCC