Form Approved. Budget Bureau No. 42-R1424

UNITED STATES DEPARTMENT OF THE INTERIOR

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	5. LEASE						
1	Santa Fe 078913						
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME						
7. UNIT AGREEMENT NAME							
	Lindrith B Unit						
-	8. FARM OR LEASE NAME						
	9. WELL NO.						
_	12						
_	10. FIELD OR WILDCAT NAME						
	Chacon-Dakota Associated						
_	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA						
Sec. 22, T24N, R3W							
	12. COUNTY OR PARISH 13. STATE						
	Rio Arriba New Mexico						
	14. API NO.						

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.) gas well 🖾 well other 2. NAME OF OPERATOR Mobil Producing TX. & N.M. Inc. 3. ADDRESS OF OPERATOR 9 Greenway Pl., Ste 2700, Houston, TX 77046 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 AT SURFACE: 811 FSL & 964 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 15. ELEVATIONS (SHOW DF, KDB, AND WD) 7092 GR SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE (NOTE: Report results of multiple completion REPAIR WELL change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** ABANDON* (other) 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.)* 2-27-81 Perf Dakota w/1 JSP2F @ 7430-38, 7510-22, 7526-30, 7534-46. Acidize w/2000 gal 2% KCl + 32 BS 2-28-81 Frac w/37,500 gal x-linked gel + 75,000# 20/40 sd. Perf 7318-40 w/l JSP2F. 3-2-81 Frac w/37,500 gal x-linked gel + 75,000# 20/40 sd.

Perf w/1 JSP2F @ 7372-80. Acidize perfs 7318-7380 w/5000 gal 2% KCl + 34 BS.

Subsurface Safety Valve: M	Set @	Ft.			
18. I hereby certify that the	e foregoing is	true and correct Authorized Agent TITLE	DATE	3-13-81	
SIGNED		(This space for Federal or State office use		1.02112	FOR HECORD
APPROVED BY	IF ANY:	TITLE	DATE	MAR	2 4 1981

EARMINGTON DISTRICT