

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
Mobil Producing TX. & N.M. Inc.

3. ADDRESS OF OPERATOR
9 Greenway Pl., Ste 2700, Houston, Texas 77046

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1840 FNL & 855 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

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF
 - FRACTURE TREATMENT
 - SHOOT OR ACIDIZE
 - REPAIR WELL
 - PULL OR ALTER CASING
 - MULTIPLE COMPLETE
 - CHANGE ZONES
 - ABANDON*
- (other) Set 8-5/8" csg.

SUBSEQUENT REPORT OF:

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

5. LEASE
Santa Fe 078914

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Lindrith B Unit

8. FARM OR LEASE NAME

9. WELL NO.
13

10. FIELD OR WILDCAT NAME
Chacon-Dakota Associated

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 27, T24N, R3W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
7083 GR

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.)*

3-8-81 - Ran 91 jts 32# & 24# K-55 ST&C csg, cmt @ 3900 w/650xB 65-35 POZ & 250x B cmt not circ. GIH w/1" down 8-5/8 & 13-3/8 annulus, stop @ 180. Dowell circ cmt to surface w/50x B.

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

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

SIGNED Jean Krueger TITLE Authorized Agent DATE 3-10-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

NMOCC

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

MAR 17 1981

FARMINGTON DISTRICT