

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
Cotton Petroleum Corporation

3. ADDRESS OF OPERATOR 80202
717 17th St., Suite 2200, Denver, Colorado

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 1900' FSL & 1660' FWL
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

5. LEASE
Contract 127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME
NA

8. FARM OR LEASE NAME
Apache

9. WELL NO.
134

10. FIELD OR WILDCAT NAME
Lindrith Gallup Dakota West

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 10-T24N-R4W

12. COUNTY OR PARISH 13. STATE
Rio Arriba New Mexico

14. API NO.
30-039-22658

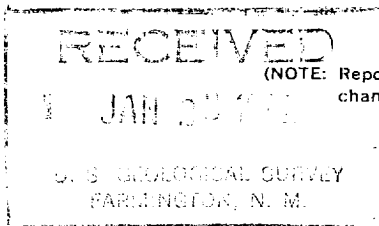
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6740' GR

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐
☐
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(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.)*

The Dakota was perfed and fraced per Sundry dated October 30, 1981. Cotton Petroleum has flow tested the well to get production data on the Dakota. Cotton plans to complete the Gallup before the end of the month.

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

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

SIGNED [Signature] TITLE Div. Prod. Mgr. DATE 1-20-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JAN 25 1982

*See Instructions on Reverse Side

NMOCC

BY Sm