

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.)

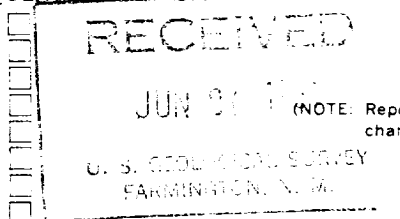
1. oil well ☒ gas well ☐ other2. NAME OF OPERATOR  
Mobil Producing TX. & N.M. Inc.3. ADDRESS OF OPERATOR  
9 Greenway Pl., Suite 2700, Houston, TX 770464. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1735 FNL & 1090 FWL  
AT TOP PROD. INTERVAL: Same as surface  
AT TOTAL 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 TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) Run tubing ☐

SUBSEQUENT REPORT OF:



5. LEASE

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.

18

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

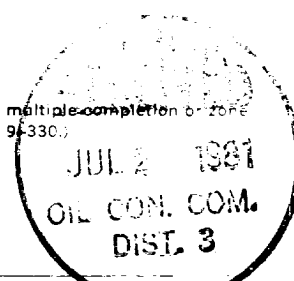
Rio Arriba New Mexico

14. API NO.

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

7096 GR

(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.)\*

6-17-81 GIH w/31' x 2-3/8" BPMA tbg perfs, SN &amp; 241 jts 2-3/8" tbg to 7563, tbg perfs 7525-31, SN @ 7524.

6-18-81 SW 3 runs - well kicked off. FL 30 BNO + 451 BLW in 24 hrs on 16/64" ck.

6-19-81 Rig down and release Farmington Unit @ 6 AM. Turn to Production.

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

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

SIGNED R.L. Hooper TITLE Authorized Agent DATE 6-24-81

(This space for Federal or State office use)

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

NMOCC

\*See Instructions on Reverse Side

Dean Elliott