Form Approved.
Budget Bureau No. 42-R1424

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 Tex & New Mex Inc

3. ADDRESS OF OPERATOR
P.O. Box 633 Midland Tex

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990/S & 1838/W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
Jicarilla E Contract 89

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jicarilla E

9. WELL NO.
7

10. FIELD OR WILDCAT NAME

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
990 FSL 1838 FWL Sec. 13 T 27 N R 3 W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mex

14. API NO.
. 2205

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

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*	☐		☐
(other) Bring Cmt above Ojo Alamos Form			

RECEIVED
MAY 25 1982
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

RECEIVED
MAY 28 1982
OIL CON. COM.
DIST. 3

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.)*

Objective To Bring cmt above Ojo Alamos Form which was unable to when orig cmt job to csg was done.

Perf 2 holes @ 3350' & Sq. Form off @ w/ 50 sxs (10 BBLs slurry on Form) Sq. held @ 3000# POH w/ Tbg & Cmt down Braden Head w/ 800 sxs (160 BBls slurry) EPP 2000#

This procedure was agreed to by Dave Elliott by phone

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

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

SIGNED _____ TITLE Engr Supv DATE 5-24-82

(This space for Federal or State office use)

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

APPROVED
MAY 27 1982
Elliott
FOR DISTRICT ENGINEER

*See Instructions on Reverse Side

NMOCC