5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR

DEPARTMENT OF THE INTERIOR	SF 078432
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
	Hodges
1. oil gas XX other	9. WELL NO.
2. NAME OF OPERATOR	#2
Southern Union Exploration Company	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Ballard Pictured Cliffs
P.O. Box 2179, Farmington, NM 87499	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Sec 28-T 26N-R 8W
below.) AT SURFACE: 990' FSL and 990' FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	San Juan New Mexico
AT TOTAL DEPTH:	14. API NO.
6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	6410' G.L.
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	-
TEST WATER SHUT-OFF	
RACTURE TREAT	
SHOOT OR ACIDIZE RECE	(NOTE: Report results of multiple completion or zone
	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
PULL OR ALTER CASING	7 1384 :
	ND MAINAGENEIN T
ABANDON*	CHOUSER ASSA SECTION SECTIONS
other) Surface Rehabilitation	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner. The Hodges #2 was plugged as reported or proposed with the starting proposed work. If well is depths for all markers and zones pertiner.	nt to this work.)* n a Sundry Notice dated
March 21, 1984. The necessary surface rehabi	litation requirements
for the well location have been accomplished	per BLM regulations as of
September 15, 1984.	0
Rehabilitation of the adjacent road, wa Caterpillar for dirt work and then inclement	s held up while waiting for a weather. Rehabilitation will
be completed in 1985.	
	CEIVED
	10V 09 1984
Subsurface Safety Valve: Manu. and Type	CON. DIV. Set @Ft.
18. I hereby certify that the foregoing is true and correct	L COIST 3
1/ // 4 = 1/2	DIST. 4
SIGNED TITLE Geologist	DATE MOVEMBER 21:1984
(This space for Federal or State of	fice use)
	- MOVE
APPROVED BY TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	TANK TO MAKE THE PARTY OF THE P
	//

*See Instructions on Reverse Side