

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  
DOME PETROLEUM CORP.

3. ADDRESS OF OPERATOR 501 Airport Drive,  
Suite #114, Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17  
below.)  
AT SURFACE: 660' FNL, 990' FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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\* ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

(other) Back Filled Reserve Pits

5. LEASE

N00-C-14-20-2938

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Old Trading Post

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Bisti-Lower Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR  
AREA

Sec. 15, T26N, R14W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6249' GR

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

RECEIVED

OCT 26 1981

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.)\*

Back filled reserve pits as per your instructions 9/28/81. Work  
completed on 10/16/81.

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

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

SIGNED H. D. Hollingsworth TITLE Area Prod. Supt. DATE October 21, 1981

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

RECEIVED FOR RECORD

OCT 26 1981

\*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY

RB

NMOCC