

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 CORPORATION

3. ADDRESS OF OPERATOR 501 Airport Drive
Suite 107, Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1520' FNL, 1120' FWL

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* ☐

(other) RUN PRODUCTION CASING

SUBSEQUENT REPORT OF:

RECEIVED

JAN 18 1980

U.S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

5. LEASE

NM 0560222

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FUSSELMAN FEDERAL

9. WELL NO.

2R

10. FIELD OR WILDCAT NAME

WAW FRUITLAND-PICTURED CLIFF

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

Sec. 17, T26N, R12W

12. COUNTY OR PARISH

SAN JUAN

13. STATE

NEW MEXICO

14. API NO.

15. ELEVATIONS (SHOW DE KDB AND WD)

5932 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.)*

Ran 40 joints (1226') 2 7/8", 6.5#, J-55 EUE casing. Casing landed at 1226' GL. Cemented with 100 sacks 65/35 Pozmix with 6% gel, 1/4# Floseal/sk and 10# Gilsonite/sk. Followed with 50 sacks class "B" cement with 2% CaCl₂ 1/4# Floseal/sk, and 10# Gilsonite/sk. Plug down at 5:00 PM 01/14/80. Circulated cement.

Subsurface Safety Valve: Manu. and Type

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

SIGNED H.D. Hollingsworth TITLE DRLG & PROD FOREMAN

DATE January 15, 1980

H.D. HOLLINGSWORTH

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

ACCEPTED FOR RECORD
JAN 22 '80

FARMINGTON DISTRICT

BY