

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYForm Approved.
Budget Bureau No. 42-B1424

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 ☐ DRY HOLE

2. NAME OF OPERATOR
DOME PETROLEUM CORPORATION

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

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1030' FNL, 990' 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: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(other)		

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.)*

PROPOSE TO PLUG & ABANDON WELL AS FOLLOWS:

PLUG NO.	INTERVAL	FEET	SACKS CEMENT
1	1200'-1450'	250	50 sacks
2	0 - 370'	370	75 sacks

Cut surface pipe off 4' below ground level and backfill. Clean local fence pit.

Verbal approval received from Mildred Kuchera at 12:00

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 February 11, 1980

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

5. LEASE
NOO-C-14-20-5390

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
NAVAJO

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
DOME NAVAJO 18-26-14

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
WILDCAT

11. SEC., T., R., OR BLK. AND SURVEY OR AREA
SEC. 18, T26N, R11W

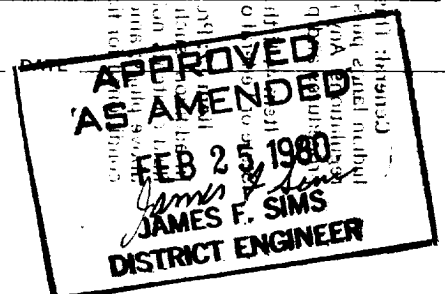
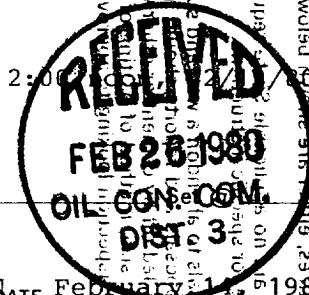
12. COUNTY OR PARISH
SAN JUAN

13. STATE
NEW MEXICO

14. API NO.

15. ELEVATIONS (SHOW DE KDB AND WD)
6041 GR

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



APPROVED
AS AMENDED

65-22140

100-111100-100
100-111100-100