

SUNDRY NOTICES AND REPORTS ON WELLS

1. oil well ☐ gas well ☒ other ☐

Supron Energy Corp. c/o John H. Hill, et al.

3. ADDRESS OF OPERATOR Kysar Building, Suite 020
300 W. Arrington, Farmington, New Mexico 8740

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

AT SURFACE: 1045' FSL & 1215' FWL (SW/4)

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

SUBSEQUENT REPORT OF:

X

REC-2

100

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

of multiple completion or zone
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.)*

1. Spudded 9 7/8" hole, drilled to 260' at 7:00 P.M., 6/29/80, cement circulated.
2. Ran 7 joints (258') of new 7", 23#, ST&C casing.
3. Set and cemented at 258'.
4. Cemented with 100 sacks, Ideal Class B, 3 sacks Calcium Chloride, 1 sack flo-cele.
5. Plug down at 4:00 P.M., 6/30/80.
6. Circulation good throughout job. Circulated 6 bbls. cement.
7. Check water shut-off at 600#, with 10" 900 Series, Gardner-Denver Blow-out Preventer.

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

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

SIGNED Herman Wallis TITLE Exploration and Development Superintendent DATE _____

OCT 17 1997

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE _____

002-500

MEMO

FAB 100