

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  
Supron Energy Corp. % John H. Hill, et al
3. ADDRESS OF OPERATOR Suite 020, Kysar Building  
300 W. Arrington, Farmington, New Mexico 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1850' FSL & 1570' FEL (NW SE)  
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) ☐

SUBSEQUENT REPORT OF:

- ☐  
☒  
☐  
☐  
☐  
☐  
☐  
☐

RECEIVED  
MAR 04 1981

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

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

5. LEASE  
SF - 078432

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
N/A

7. UNIT AGREEMENT NAME  
N/A

8. FARM OR LEASE NAME  
Hodges

9. WELL NO.  
15-E

10. FIELD OR WILDCAT NAME  
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 27 T26N R8W

12. COUNTY OR PARISH  
San Juan

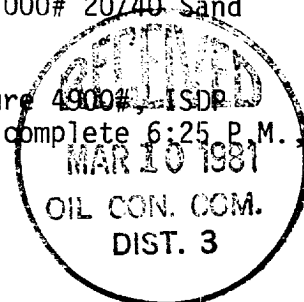
13. STATE  
New Mexico

14. APP NO.

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

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. Frac'd Dakota with 110,796 gallons Mini Max III-40, 160,000# 20/40 Sand and 40,000# 10/20 Sand.
2. Maximum Treating Pressure 6700#, Average Treating Pressure 4900#, ISDP 6450#, Final Shut-In Pressure 1750# in 15 minutes. Job complete 6:25 P.M. 2/20/81.



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

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

SIGNED Herma V. Walker TITLE Exploration/Development Superintendent DATE March 3, 1981

(This space for Federal or State office use)

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

MAR 9 1981

FARMINGTON DISTRICT