

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 ☐ gas ☒ other ☐
-
2. NAME OF OPERATOR
Supron Energy Corp. % John H. Hill, et al
-
3. ADDRESS OF OPERATOR Kysar Building, Suite 020
300 W. Arrington, Farmington, New Mexico 87401
-
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1850' FSL & 790' FWL (NW SW)
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:

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

RECEIVED (NOT)

JAN 21 1981

U. S. GEOLOGICAL SURVEY
WASHINGTON, D. C.

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

and give pertinent dates,
the subsurface locations and

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 Mesa Verde with 95,970 gallons- 2% KCL Slickwater, 68,000# 20/40 Sand.
2. Maximum Treating Pressure 2900#, 15 minute Shut-In Pressure 700#. Job complete 1/11/81.

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

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

SIGNED Ernest V. Wallis TITLE Exploration/Development Superintendent DATE January 20, 1981

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

***See instructions on Reverse Side**