

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: 810' FNL & 1770' FWL (NE NW)

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

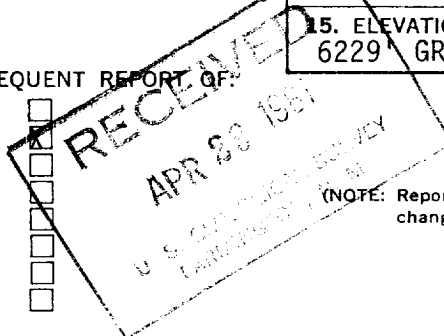
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

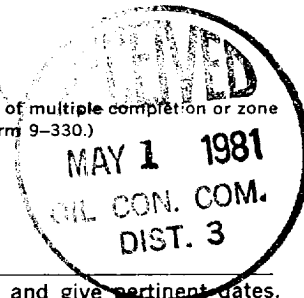
TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

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(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.)*

1. Frac'd the Pictured Cliffs perforations (2216' - 2246') with 9,450 gallons 75% Quality Foam, 2% KCL water, 37,500# 10/20 Sand and 394,400 SCF Nitrogen.
2. Maximum Treating Pressure 1800 PSI, Minimum Treating Pressure 1600 PSI, Average Treating Pressure 1800 PSI, ISDP 1700 PSI. Job completed at 11:41 A.M., 4/23/81.

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

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

SIGNED Thomas V. Quinn TITLE Superintendent DATE April 28, 1981

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

APR 30 1981

FARMINGTON DISTRICT