UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

	LEASE AM 13 5 5 26A
	. IF INDIAN, ALLOTTEE OR TRIBE NAME
	. UNIT AGREEMENT NAME
	FARM OR LEASE NAME H. K. Riddle
	. WELL NO.
1	. FIELD OR WILDCAT NAME Basin Dakota Gas
1:	SEC., T., R., M., OR BLK. AND SURVEY OF AREA Sec. 7, T27N, R12W
12	COUNTY OR PARISH 13. STATE San Juan New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form $f(\cdot)$ proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.) 1. oi! gas well X well other 2. NAME OF OPERATOR Mobil Producing TX. & N.M. Inc. 3. ADDRESS OF OPERATOR 9 Greenway Plaza, Suite 2700, Hous, TX 77046 4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17 below.) AT SURFACE: 650FWL & 660 FSL AT TOP PROD. INTERVAL: same as above AT TOTAL DEPTH: same as above 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone PULL OR ALTER CASING change on Form 9-330.) MULTIPLE COMPLETE

- 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.)*
- 3/17/80 MIRU Flint DD Unit.
- 3/18/80 FOH w/ 2-3/8" tbg. & pkr GIH to liner top @ 5080.

X

- 3/19/80 Set Baker 4-1/2 cmt. ret @ 5455 w/ 10x Class B cmt. on top. Attm to sqz cmt OHZ. Could not PI @ 3000 psi. Set 5 plugs. Plug 1: 5145-5035. 10x Class B Plug 2: 3998-3890, 20x Class B Plug 3: 2810-2702, 20x Class B Plug 4: 516-408 20x Class B Plug 5: 120-surface, 22x Class B.
- 3/20/80 Had gas on surface csg. Cmt between 7" & 10-3/4" csg. w/ 50x Class B Job completed @ 2PM. Instl P&A Marker. Well P&A. FINAL REPORT



JAN 0 7 1985

Subsurface Safety Valve: Manu. and Type

OIL CON. DIV. Set @ __

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

CHANGE ZONES

ABANDON* (other)

> Authorized Agent DIST. 3 April 2, 1980 DATE

(This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY

APPROVED AS AMENDED

Approved as to plugging of the well bore. Liability under bond is retained until surface restoration is completed.

*See Instructions on Reverse Side



JAN 3 1995 Tel 9" Eran Wcken. M. MILLENBACH AREA MANAGER