

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
DAMSON OIL COMPANY

3. ADDRESS OF OPERATOR C/o Walsh Engr. & Prod. Corp.
P. O. Drawer 419 Farmington, New Mexico 87499

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

AT SURFACE: 790' FSL, 790' FEL

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) See Below

5. LEASE

SF-047039 (B)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Day "J"

9. WELL NO.

3-J

10. FIELD OR WILDCAT NAME

Aztec Fruitland

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8-T28N-R10W
NMMPM

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5800' KB

(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.)*

Correction of field from: Fulcher Kutz P. C.
to: Aztec Fruitland

Well Shut In - 7/3/84

Turned Back On - 1/3/85

Well was off more than 90 days.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

FOR: DAMSON OIL COMPANY

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

SIGNED

Ewell N. Walsh, PE

TITLE

Walsh Engr. &
Prod. Corp.

DATE

ACCEPTED FOR RECORD
1/8/85

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

BY

*See Instructions on Reverse Side

NMOCC