## **UNITED STATES** DEPARTMENT OF THE INTERIOR

	Budget Bureau No. 42-K142
5, LEASE	
SF 080724	A
6. IF INDIA	N, ALLOTTEE OR TRIBE NAME
7. UNIT AG	REEMENT NAME
8. FARM OF	R L FASE NAME

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
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.)	7. UNIT AGREEMENT NAME:  8. FARM OR LEASE NAME	
1. oil gas  other	2achry 9. WELL NO.	
2. NAME OF OPERATOR  SUPRON ENERGY CORPORATION  3. ADDRESS OF OPERATOR  P.O. Box 808, Farmington, New Mexico 8740.  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  AT SURFACE: 970 ft./South; 940 ft./West line AT TOP PROD. INTERVAL: Same as above AT TOTAL DEPTH: Same as above	25 10. FIELD OR WILDCAT NAME Bloomfield Chacra Extension 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 11, T-28N, R-10W, N.M.P.M. 12. COUNTY OR PARISH San Juan New Mexico 14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	Not assigned  15. ELEVATIONS (SHOW DF, KDB, AND WD)  5666 DF	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF	(NOTE: Report results of multiple completion or zone change on Form 9–330.)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones per including above ground equipment was painted brown, 595a-30318 color and re-seeded with B.L.M. real	frectionally drilled, give subsurface locations and to this work.)*  federal standard	
Subsurface Safety Valve: Manu. and Type	OIL CONL OCM, DIST. 8	
Substitute Safety Faire, maila, and Type		

18. I hereby certify that the foregoing is true and correct TITLE <u>Area Supt.</u> DATE <u>August 10, 1981</u> (This space for Federal or Sta e office use)

\_\_ DATE ACCEPTED FOR RECORD

AUG 1 4 1981

\*See Instructions on Reverse Side

FARMINETON DISTRICT