

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT --" for such proposals.

00 AUG 28 11:11 AM  
ALBUQUERQUE, N.M.

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other:

2. Name of Operator

Mallon Oil Company

3. Address and Telephone No.

P.O. Box 2797 Durango, CO 81302 (970) 362-9100

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2000' FNL and 1700' FWL  
Sec. 2, T29N-R03W Unit F

5. Lease Designation and Serial No.  
MDA 701-98-0013

6. If Indian, Allote or Tribe Name  
Jicarilla Apache Tribe

7. If Unit or CA, Agreement Designation  
N/A

8. Well Name and No.  
Jicarilla 29-03-02 No. 1

9. Well API No.  
30-039-26031

10. Field and Pool, or Exploratory Area  
East Blanco, Pictured Cliffs

11. County or Parish, State  
Rio Arriba, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other: Pressure Test  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

13. 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 zone.)

Mallon Oil company pressure tested the casing to 2000 psi on June 20, 2000  
on the above referenced well.

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

Signed

Gay Davis

Title Office Manager

Date 8/3/00

(THIS SPACE FOR FEDERAL OR STATE OFFICE USE)

Approved By

/s/ Patricia M. Hester

Title

Date

Conditions of approval, if any: