

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

~~CONFIDENTIAL~~

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.

SUBMIT IN TRIPLICATE

| | |
|--|--|
| 1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other: | 5. Lease Designation and Serial No. Jic 457 |
| 2. Name of Operator Mallon Oil Company | 6. If Indian, Allote or Tribe Name Jicarilla Apache |
| 3. Address and Telephone No. P.O. Box 3256, Carlsbad, NM 88220 (505) 885-4596 | 7. If Unit or CA, Agreement Designation N/A |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2400' FSL 1500' FWL (NE SW) Unit K Sec. 10, T30N-R03W | 8. Well Name and No. Jicarilla 457-10 No. 8 |
| | 9. Well API No. 30-039-25783 |
| | 10. Field and Pool, or Exploratory Area Cabresto Canyon; Ojo Alamo Ext. |
| | 11. County or Parish, State Rio Arriba County, NM |

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

| TYPE OF SUBMISSION | TYPE OF ACTION |
|---|---|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back |
| | <input type="checkbox"/> Casing Repair |
| | <input type="checkbox"/> Altering Casing |
| | <input checked="" type="checkbox"/> Other: Production Csg |
| | <input type="checkbox"/> Change of Plans |
| | <input type="checkbox"/> New Construction |
| | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Conversion to Injection |
| | <input type="checkbox"/> 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 ran 5-1/2" x 15.5 lb/ft production csg set at 3925'. Cemented with 530 sxs of cmt, circ 45 sxs to surface. Pressure test csg on 4/19/98 to 1000 psi.

RECEIVED
JUL 8 1998
OIL CON. DIV

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

| | | |
|--|--|---------------------|
| Signed <u>Christy Serrano</u> Christy Serrano | Title <u>Production Secretary</u> | Date <u>6-23-98</u> |
| (THIS SPACE FOR FEDERAL OR STATE OFFICE USE) | | |
| Approved By <u>Patricia M. Ketch</u> | Title <u>Lands and Mineral Resources</u> | Date <u>7-6-98</u> |
| Conditions of approval, if any: | | |

Title 18 U. S. C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

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