

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.

*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.
2. Name of Operator <b>Mallon Oil Company</b>		6. If Indian, Allote or Tribe Name <b>Jicarilla Apache Tribe</b>
3. Address and Telephone No. <b>P.O. Box 3256, Carlsbad, NM 88220 (505) 885-4596</b>		7. If Unit or CA, Agreement Designation <b>N/A</b>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>1450' FSL and 1500' FEL (NW SE) Unit J Sec. 28, T30N-R03W</b>		8. Well Name and No. <b>Jicarilla Tract 1-30-3-28 No. 3</b>
		9. Well API No. <b>30-039-26032</b>
		10. Field and Pool, or Exploratory Area <b>E. Blanco, Pictured Cliffs</b>
		11. County or Parish, State <b>Rio Arriba County, New Mexico</b>

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: Change Footage
	<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 requests that the footage for the above reference well be changed to 1757' FSL and 1757' FEL. The proposed footage is the actual footage that was used as reference for the onsite.**

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

Signed Christy Sierrano

Title Production Secretary

Date 11-2-98

(THIS SPACE FOR FEDERAL OR STATE OFFICE USE)

Approved By Patricia M. Koch

Title Lands and Mineral Resources

Date 11-17-98

Conditions of approval, if any:

COMPANY: MALLO DIL COMPANY

LEASE: JICARILLA TRACT 1-30-3-28 #3

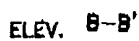
FOOTAGE: 1757 FSL, 1757 FEL

SEC.: 28 TWN: 30-N RNG: 3-W NMPM

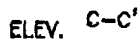
ELEVATION: 7074'



C/L



C/L

C/L

**Daggett Enterprises, Inc.**  
Surveying and Oil Field Services  
F. O. Box 2769 Farmington, NM 87408  
Phone (505) 328-1772, Fax (505) 328-8019



Form C-102  
Revised February 21, 1994  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

State of New Mexico  
Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, NM 87604-2088

Form C-102  
Revised February 21, 1994  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 4 Copies  
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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code		3 Pool Name	
4 Property Code		5 Property Name JICARILLA TRACT 1-30-3-28			6 Well Number 3
7 Oiled No.		8 Operator Name MALLON OIL COMPANY			9 Elevation 7074'

10 Surface Location

UL or lot no.	Section	Township	Range	Lot 14n	Feet from the	North/South line	Feet from the	East/West line	County
J	28	30-N	3-W		1757	SOUTH	1757	EAST	RIO ARriba

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot 14n	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres	13 Joint or Infill	14 Consolidation Code	15 Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

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17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date of Survey \_\_\_\_\_

Signature \_\_\_\_\_

Professional Land Surveyor

8894

Certificate Number \_\_\_\_\_