SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to deepen or reentry to a different reservation.  SUBMIT IN TRIPLICATE  1. Type of Well  Oil Well X Gas Well Other:  Name of Operator  Mallon Oil Company  3. Address and Telephone No P. O. Box 2797 Durango, CO 81302  (970) 382-9100  4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 847' FSL and 855' FEL (SE SE) Unit P Sec. 27, T30N-R03W  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT TYPE OF SUBMISSION  TYPE	5. Lease Designation and Serial No. MDA 701-98-0013 6. If Inglian, Allotte or Tribe Name Jicarilla Apache Tribe 7. If Unit or CA, Agreement Designation N/A  8. Well Name and No Jicarilla 30-03-27 No. 1 9. Well API No. 30-039-26099 10. Field and Pool, or Exploratory Area Cabresto Canyon; Tertiary 11. County or Parish, State Rio Arriba County, New Mexico
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Mallon Oil Company  B Address and Telephone No P. O. Box 2797 Durango, CO 81302 (970) 382-9100  C Location of Well (Footage, Sec., T., R., M., or Survey Description)  847' FSL and 855' FEL ( SE SE) Unit P  Sec. 27, T30N-R03W  CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT	Jicarilla 30-03-27 No. 1  9. Well API No. 30-039-26099  10. Field and Pool, or Exploratory Area  Cabresto Canyon; Tertiary  11. County or Parish, State  Rio Arriba County, New Mexico
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	RT, OR OTHER DATA
TYPE OF SUBMISSION TYPE	
X Notice of Intent  Abandonment  Recompletion  Plugging Back  Casing Repair  Altering Casing  X Other: Surface Pipe Cha  Revised due to Pool	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 Recomyletion Report and Log form.)
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work subsurface locations and measured and true vertical depths for all markers and zones pertinent to this zone.)*  Mallon Oil Company is requesting that the surface pipe be changed from 500' to referenced well.	

14. I hereby certify that the foregoing is true and correct		
Signed Gay Davis	Title	Office Manager Date: 09/13/00
(THIS SPACE FOR FEDERAL OR STATE OFFICE USE)		
/s/ Patricia M. Hester		Lands and Mineral Resources Nov 1 4 200
Approved B	Title	Lands and Mineral Resources Date NOV 1 4 200
Conditions of approval, if any.		