

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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.)

1. oil ☐ well gas ☒ well other ☐  
2. NAME OF OPERATOR  
*SUPRON ENERGY CORPORATION*  
3. ADDRESS OF OPERATOR  
*P.O. Box 808, Farmington, New Mexico 87401*  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: *1800 ft./N ; 900 ft./W line*  
AT TOP PROD. INTERVAL: *Same as above*  
AT TOTAL DEPTH: *Same as above*

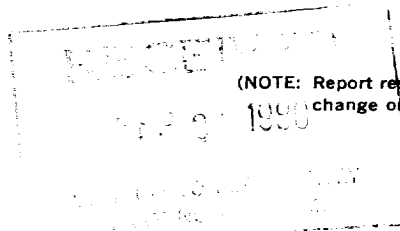
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE

*SF 076958*

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

*Albright*

9. WELL NO.

*6-E*

10. FIELD OR WILDCAT NAME

*Basin Dakota*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

*Sec. 22, T-29N, R-10W, N.M.P.M.*

12. COUNTY OR PARISH

*San Juan*

13. STATE

*New Mexico*

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

*5642 GL.*

17. 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 work.)\*

- Spudded 12-1/4" surface hole at 12:30 a.m. 9-11-80.*
- Drilled surface hole to total depth of 330 ft. R.K.B.*
- Ran 7 joints of 8-5/8", 24.00# casing. Landed at 330 ft. R.K.B.*
- Cemented with 275 sacks of class "B" with 3% calcium chloride. Plug down at 1:00 a.m. 9-13-80. Cement circulated to surface.*
- Waited on cement for 12 hours.*
- Pressure tested casing to 1000 P.S.I. for 15 minutes. Held OK.*

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED *Kenneth E. Roddy* TITLE *Production Supt.* DATE *September 22, 1980*

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: