5. LEASE

N.M. 0702

UNITE	ED S	STATE	:S
DEPARTMENT	OF	THE	INTERIOR
GEOLOGI	CAL	SUR	VEY

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plur back to a different	7. UNIT AGREEMENT NAME			
(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.)	8. FARM OR LEASE NAME			
1. oil gas 🖾 other	Reid "B"			
2. NAME OF OPERATOR	9. WELL NO.			
Supron Energy Corporation	2 - E 10. FIELD OR WILDCAT NAME			
3. ADDRESS OF OPERATOR	Basin Dakota - Wildcat Chacra			
P.O. Box 808, Farmington, New Mexico 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17	AREA			
below.) AT SURFACE: 1520 Ft./N; 1120 Ft./W line	Sec. 31, T-29N, R-10W, N.M.P.M.			
AT TOP PROD. INTERVAL: Same as above	12. COUNTY OR PARISH 13. STATE San Juan New Mexico			
AT TOTAL DEPTH: Same as above	14. API NO.			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	44. WELLIO.			
REPORT, OR OTHER DATA	15 ELEVATIONS (SHOW DF, KDB, AND WD)			
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF				
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*	7.00			
FRACTURE TREAT				
SHOOT OR ACIDIZE				
PULL OR ALTER CASING	(NOTEL Report results of multiple sent the paragraph change on Form 9-330.)			
MULTIPLE COMPLETE IX	SUK change on Form 9-330.)			
CHANGE ZONES	O. 1993 m			
ABANDON*	1987 J			
U. FAR	OL CON 5987 DIST SOM.			
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent	all pertinent details, and give pertinent dates,			
This well was originally approved as a single Dak				
complete the well as a Dakota-Chacra dual complet	ion after finding the Charac			
zone during logging. We desire to complete as fo	110ws. Perforate the Delete			
zone and fracture to stimulate production. Set a	bridge plug above the Doresta			
cone. Tellocate and fracture the Chacra zone to	Stimulate production Class			
the chacra zone up. Pull the bridge plug. Clean	the Dakota zone un Pun			
cubing with a production packer and set above the	Dakota zono with a alidi			
sieeve above the packer. Set packer. Nipple dow	m the wellhead Tort maken			
for leakage. Test Dakota zone. Test Chacra zone	and connect to a gathering			
y occine				
Gas from both formations have previously been ded	icated to a transporter.			
Subsurface Safety Valve: Manu. and Type				
18. I hereby certify that the foregoing is true and correct				
RUCY D. MOLLO TITLE Area Supt.	DATE February 20, 1981			
(This space for Federal or State office	e use)			
APPROVED BY TITLE	DATE			
CONDITIONS OF APPROVAL, IF ANY:	APPROVED			
	APPROVED			
S /				

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*See Instructions on Reverse Side

NMOCG

SUPRON ENERGY CORPORATION REID "B" 2				All die	lentes must be	7	se myter timisskarter	e of the Ke	r II na		<u>, </u>
The strict Section 1 29 NORTH 10 WEST SAN JUAN 10 WEST SAN JUAN 1120 Les toma the WEST Inc. 120 Les tomathe WEST Inc. 120	i-cioloi	NT E	MEDCY CO	DOD AT	TON	1.001	•	٠.			¥÷11 110. 2-E
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120 test from the MORTH los and 120 test from the WEST In. With the test from the Morth of test and the state of the stat	_	J-(1		1	9 NORTH	.	•		•	N	
Deboted CHACKA Deboted CHACKA	cival l'astage Lace	olion (ul kell;				-				
1. Outline the accease dedicated to the subject well by colored pencil or hackane marks on the plat below. 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both on to working interest and royalty). 3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc? — Yes — No — If answer is "yes," type of consolidation If answer is "no," list the owners and tract descriptions which have octually been consolidated. (Use reverse side of this form if necessary.) No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division. CERTIFICATION Thereby certify that the information continued therefore the therefore the interest is the interest of the interest in the interest of the interest is the interest of the i	1520	1-01	from the	NOR	TH line and		1120	frot from	the W		= =
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Yes No If answer is "yes," type of consolidation	2. If more that interest and 3. If more than	nn oi disoy	ne lease is alty).	dedicated	d to the well	edici	line each and i	dentify (the ownership (licicof	(both as to working
Thereby ceitify that the Information contained hines have in a true and complete to the best of my knowledge and belief. Name Area Superintendent Position Supron Energy Corporation Company March 7, 1980 Dots Thereby ceitify that the Information contained and the contained a	Yes [If answer is this form if a No allowable	"no nece	No If and or it is the or ssary.)	wners and	yes;" type of d tract descr 	cons iption	solidation	consoli	dated (by com	munitiz	ation, unitization,
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