

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: 1840 ft./N ; 1520 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:

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

SUBSEQUENT REPORT OF:

☒
☐
☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE

N.M. 020982

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Summit

9. WELL NO.

6-E

10. FIELD OR WILDCAT NAME

Basin Dakota-Bloomfield Chacra Ext.

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

Sec. 33, T-29N, R-11W, N.M.P.M.

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

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

5557 R.K.B.

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

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.)*

1. Spudded 12½" surface hole at 12:30 p.m. 9-22-81.
2. Drilled 12½" surface hole to total depth of 260 ft. R.K.B.
3. Ran 6 joints of 8-5/8", 24.00#, H-40 casing and set at 256 ft. RKB.
4. Cemented with 200 sacks of class "B" with 3% calcium chloride. Plug down at 4:00 p.m. 9-22-81. Cement circulated to the surface.
5. Waited on cement for 12 hours.
6. Pressure-tested casing to 800 P.S.I. for 15 minutes. Held OK.

Subsurface Safety Valve: Manu. and Type _____

Set @ _____

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

SIGNED

Kenneth E. Roddy
Kenneth E. Roddy

TITLE Production Supt.

DATE September 28, 1981

(This space for Federal or State office use)

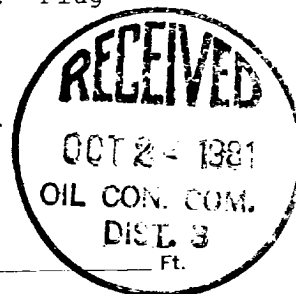
APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side



NM000

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