

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  
Estate of J. Glenn Turner
3. ADDRESS OF OPERATOR  
P.O. Box 255, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 830' FSL, 1040' FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH: Same
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:

- ☒  
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5. LEASE  
SF-078128
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
N/A
7. UNIT AGREEMENT NAME  
N/A
8. FARM OR LEASE NAME  
Federal 28
9. WELL NO.  
1
10. FIELD OR WILDCAT NAME  
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
S28, T30N-R9W, N.M.P.M.
12. COUNTY OR PARISH 13. STATE  
San Juan New Mexico
14. API NO.  
30-045-25139
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5834 Gr., 5847 est. 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.)\*

Spud well 12:00 p.m., 9/25/81. Drilled 12 3/4" hole to 238 ft. Ran 7 jts 9 5/8", 32.3#, H-40 casing to 238 ft. Cemented with 190 sacks Class B cement, 2 sks. Flocel, 2% CaCl<sub>2</sub>. Circulated cement to surface. Plug down at 6:45 p.m., 9/25/81.

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

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

SIGNED [Signature] TITLE Agent DATE October 1, 1981

(This space for Federal or State office use)

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

\*See Instructions on Reverse Side

NMOC