Form 9-331			1
(May 1963)	UNITED STATES SUBMIT IN TRIPLICATE		Budget Bureau No. 42-R142
	DEPARTMENT OF THE INTER	RIOR verse side)	5. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICAL SURVEY	GEOLOGICAL SURVEY	
SUN	DRY NOTICES AND REPORTS	ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAM
(Do not use this	Revejo-Ute Nountain		
1.  OIL GAS WELL WELL	7. UNIT AGREEMENT NAME		
2. NAME OF OPERATOR	8. FARM OR LEASE NAME		
be Superior Oil	Havajo-Ute Mountain		
3. ADDRESS OF OPERATOR	9. WELL NO.		
. C. Drever 'G'	10. FIELD AND POOL, OR WILDCAT		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)			
At surface 698 FWL	and 2090' PML, Sect on 26		Wildcat
			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
			richi 919ti
14. PERMIT NO.	15. ELEVATIONS (Show whether		12. COUNTY OR PARISH 13. STATE
14. PERMIT NO.	15. ELEVATIONS (Show whether 5920' 6d., 5932	DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE  THE JUST HOW HOW: CO
14. PERMIT NO.  16.	•	DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE New Here: CO
16.	5920' Gd., 5932	DF, RT, GR, etc.)  * 表。多。  Nature of Notice, Report, or G	12. COUNTY OR PARISH 13. STATE New Heat: CO
16.	Check Appropriate Box To Indicate NOTICE OF INTENTION TO:	DF, RT, GR, etc.)  * 表。多。  Nature of Notice, Report, or G	12. COUNTY OR PARISH 13. STATE THAN NEW HORE; CO Other Data
16.	Check Appropriate Box To Indicate NOTICE OF INTENTION TO:	Nature of Notice, Report, or Subseq	12. COUNTY OR PARISH 13. STATE New Here: CO Other Data UEENT REPORT OF:
16. N TEST WATER SHUT-OR	Check Appropriate Box To Indicate NOTICE OF INTENTION TO:	Nature of Notice, Report, or Subsection  Water Shut-off	12. COUNTY OR PARISH 13. STATE New Here: CO Other Data UENT REPORT OF:
16.  TEST WATER SHUT-OF FRACTURE TREAT	Check Appropriate Box To Indicate  SOTICE OF INTENTION TO:  PULL OR ALTER CASING  MULTIPLE COMPLETE	Nature of Notice, Report, or subsective shorting or acidizing (Other)	12. COUNTY OR PARISH 13. STATE New Ment: CO  Other Data  UENT REPORT OF:  REPAIRING WELL  ALTERING CASING  ABANDONMENT*
16.  TEST WATER SHUT-OF FRACTURE TREAT SHOOT OR ACIDIZE	Check Appropriate Box To Indicate NOTICE OF INTENTION TO:  PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON*	Nature of Notice, Report, or Subsection  WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING  (Other)  (NOTE: Report result	12. COUNTY OR PARISH 13. STATE  THEN HOW HOR: CO  Other Data  UENT REPORT OF:  REPAIRING WELL  ALTERING CASING
TEST WATER SHUT-OF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	Check Appropriate Box To Indicate  STOTICE OF INTENTION TO:  PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS  COMPLETED OPERATIONS (Clearly state all pertine well is directionally drilled, give subsurface los	Nature of Notice, Report, or  SUBSECT  WATER SHUT-OFF  FRACTUBE TREATMENT  SHOOTING OR ACIDIZING  (Other)  (Note: Report result  Completion or Recompleted on the Recompleted of the Report of the Recompleted on the Recompleted of the Recomple	12. COUNTY OR PARISH 13. STATE  THAT HOW MORE. CO  Other Data  UENT REPORT OF:  REPAIRING WELL  ALTERING CASING  ABANDONMENT*  s of multiple completion on Well bletion Report and Log form.)  including estimated date of starting an
TEST WATER SHUT-OF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR Proposed work. If nent to this work.)	Check Appropriate Box To Indicate  STOTICE OF INTENTION TO:  PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS  COMPLETED OPERATIONS (Clearly state all pertine well is directionally drilled, give subsurface los	Nature of Notice, Report, or Subsective States Shut-off Fracture treatment Shooting or acidizing (Other)  (Note: Report result Completion or Recompletion and give pertinent dates eations and measured and true vertices.)	12. COUNTY OR PARISH 13. STATE  THAN NOW MORE: CO  Other Data  UENT REPORT OF:  REPAIRING WELL  ALTERING CASING  ABANDONMENT*  s of multiple completion on Well  cletion Report and Log form.)  cal depths for all markers and zones pert
TEST WATER SHUT-OF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR proposed work. If nent to this work.)  Air drilled a	Check Appropriate Box To Indicate  STOTICE OF INTENTION TO:  PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS  COMPLETED OPERATIONS (Clearly state all pertine well is directionally drilled, give subsurface loc	Nature of Notice, Report, or  SUBSECT  WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING  (Other)  (Note: Report result Completion or Recompletions and measured and true vertices.	12. COUNTY OR PARISH 13. STATE New Here: CO  Other Data  UENT REPORT OF:  REPAIRING WELL  ALTERING CASING  ABANDONMENT*  s of multiple completion on Well  detion Report and Log form.)  in including estimated date of starting and all depths for all markers and zones pertically.
TEST WATER SHUT-OF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR Proposed work. If nent to this work.)  Air drilled a  Propose to plus	Check Appropriate Box To Indicate  GOTICE OF INTENTION TO:  PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS  COMPLETED OPERATIONS (Clearly state all pertine well is directionally drilled, give subsurface loc	Nature of Notice, Report, or Subsections and measured and true vertices.	12. COUNTY OR PARISH 13. STATE New Men: CO  Other Data  UENT REPORT OF:  REPAIRING WELL  ALTERING CASING  ABANDONMENT*  s of multiple completion on Well  detion Report and Log form.)  and depths for all markers and zones pert

2) Fill hole with water.

3) Place 10 sacks common cement in top of 8-5/8 cas ng.

OIL CON. COM. DIST. 3

Hote: About program verbally approved by Mr. P. T. McGrath by phone

U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.

		A. Derick of		
18. I hereby certify that the foregoing is true and correct ONGINAL SIGNED BY SIGNED  L. C. MORDY	TITLE Drilling	Engineer	9-22-64 DATE	
(This space for Federal or State office use)				
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE		DATE	