(other)

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES DEPARTMENT OF THE INTERIOR

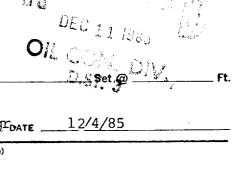
	Budget Bureau No. 42R1424
ſ	5. LEASE
- 1	Contract 126
١	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
4	/ Jicarilla Apache
١	7. UNIT AGREEMENT NAME
١,	/ NA
	8. FARM OR LEASE NAME
	Apache
	9. WELL NO.
	153
	10. FIELD OR WILDCAT NAME
	Lindrith Gallup Dakota W.
09	11. SEC., T., R., M., OR BLK. AND SURVEY OR
7	AREA Sec 1 T24N R4W
	12. COUNTY OR PARISH 13. STATE
	Rio Arriba NM
	14. API NO.
:,	
	15. ELEVATIONS (SHOW DF, KDB, AND WD)

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 differer reservoir. Use Form 9–331–C for such proposals.) well other well 2. NAME OF OPERATOR Cotton Petroleum Corporation 3. ADDRESS OF OPERATOR 3773 Cherry Creek Dr No #750, Denver, CO 802 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 1 below.) 2140' FEL AT SURFACE: 410' FNL AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT RECEIVED SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone change on Form 9-330.) PULL OR ALTER CASING DEC 0.9 1985 MULTIPLE COMPLETE **CHANGE ZONES** ABANDON* BUREAU OF LAND MANAGEMENT Spud & surf casing

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.)*

FARMINGTON RESOURCE AREA

Spud 12-1/4" hole at 7:30 pm 11-23-85 using Arapahoe Rig #11. Ran 9 jts 8-5/8" 24# ST&C casing meas 377.96', set at 391' KB. Cement with 260 sxs Class B + 2% Ca Cl, 1/4#/sxs Celloflake, Circulate 10 bbls good gement to surface. Plug down at 7:15 am 11-24-85.



Subsurface Safety Valve: Manu. and Type ____ 18. I hereby certify that the foregoing is true and correct TITLE Division Prod. MgrDATE (This space for Federal or State office use) DATE . TITLE APPROVED BY

*See Instructions on Reverse Side