

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. ☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR
Mallon Oil Company

3. ADDRESS OF OPERATOR
2750 Security Life Building, Denver, CO 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below)
At surface
1850' FNL & 1670' FWL

5. LEASE DESIGNATION AND SERIAL NO.
NM 43753

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Post Federal

9. WELL NO.
#13-6

10. FIELD AND POOL, OR WILDCAT
Gavilan Mancos/Gavilan
Greenhorn-Graneros-Dakota

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 13, T25N, R2W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
NM

RECEIVED

14. PERMIT NO.
MAR 18 1986

15. ELEVATIONS (Show whether OF, RT, GR, etc.)
7450' GL

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.) *

3-15-86 Rigged up Petro Wireline. Ran GR-CLL from sand fill at 7841' RKB to tubing @ 5398' RKB. The frac treatment went into most perforations. It did not treat the following perforations: 7080, 7176, 7287, 7404, 7568. The following perfs are questionable: 7152, 7278, 7292, 7312, 7414, 7474, 7496, 7518, 7537, 7588. Trip tubing out of hole. Trip in hole and land tubing as follows:

DESCRIPTION	LENGTH	DEPTH
KB to landing point	10.50	0-11
213 jts 2-7/8" 6.5#/ft N-80 used tbgr	6544.07	11-6555
1 tubing anchor	2.70	6555-6557
34 jts 2-7/8" 6.5#/ft N-80 used tbgr	1025.36	6557-7583
1 seating nipple	.75	7583-7584
1 2-7/8" perforated sub	4.20	7584-7588
1 jt 2-7/8" mud anchor	31.14	7588-7619
	7618.72	

(NOTE: had to kill well several times to land tubing)

Nipple down BOP. Nipple up wellhead. Shut well in. SDFN.

File Completion Report by 4/28/86

RECEIVED

MAR 31 1986

OIL CON. DIV.
DIST. 3

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

SIGNED Kevin D. McGee TITLE Agent

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED 3-17-86
DATE MAR 25 1986

DATE MAR 25 1986
FARMINGTON RESOURCE AREA
BY [Signature]

*See Instructions on Reverse Side

NMOCC