## UNITED STATES DEPARTMENT OF THE INTERIO

OTHER STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	SF-080566-A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	7. UNIT AGREEMENT NAME:
1. oil — gas	8. FARM OR LEASE NAME
well well dother	Stevie Joe-Federal
2. NAME OF OPERATOR	9. WELL NO.
Minel, Inc.	2 10. FIELD OR WILDCAT NAME:
3. ADDRESS OF OPERATOR 457-C Washington SE	Tapacito Pictured Cliffs
Albuquerque, NM 87108  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
AT SURFACE: 1790' s/n and 1850' elw	Sec. 8-T25N-R3W
AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same	12. COUNTY OR PARISH 13. STATE Rio Arriba NM
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	None
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	15. ELEVATIONS (SHOW DF, KDB, AND WD)
FRACTURE TREAT  SHOOT OR ACIDIZE  REPAIR WELL  PULL OR ALTER CASING  MULTIPLE COMPLETE  CHANGE ZONES  ABANDON*  (other)	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is directly measured and true vertical depths for all markers and zones pertinent 12-4-84:  Ran 119 joints 2 7/8", 6.5#, J-55 to 3723.67' and landed at 3721' K.B. Halliburton and cemented with 125 Pozmix, 2% gel, and 10% salt. Ta cu.ft.) Class B neat cement. Spots on top of plug. PBTD at 3720' K.I Pressured up to 2600 psi and held Bled off pressure and plug did not psi and left shut-in. Good circulated Circulated 10 cu.ft. of cement to start the start of the st	to this work.)*  Tubing for casing measuring (11' K.B.) Rigged up sacks (160 cu.ft.) 50/50 iled in with 40 sacks (47.2 ted 100 gallons acetic acid B. Plug down at 11:30 A.M. for 15 minutes. Held okay. seat. Pressured up to 3500
Subsurface Safety Valve: Manu. and Type	
to. Thereby certify that the foregoing is true and correct	
TITLE Agent  (This space for Federal or State office of Pederal or State of	рате <u>December</u> 10, 1984
(This space for Federal or State office	use)
APPROVED BY TITLE	
CONDITIONS OF APPROVAL, IF ANY:	DÁTE