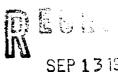
Form 9–331 Dec. 1973	5 BLM	1 Ladd	1 File	Form Approved. Budget Bureau No. 42–R1424			
	UNITED STATES		5. LEASE				
DEP	ARTMENT OF THE	SF-07916	SF-079161				
	GEOLOGICAL SUR	6. IF INDIAN, ALLOTTEE OR TRIBE NAME					
SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)			7. UNIT AGREEMENT NAME				
reservoir. Use Form 9-3:	31-C for such proposals.)		8. FARM OR LEASE NAME				
1. oil gas		Lindrith  9. WELL NO.					
2. NAME OF OPER	RATOR	14	14				
Ladd Petro		10. FIELD OR W					
3. ADDRESS OF C	PERATOR		Basin Dakota - Largo Gallup				
	8, Farmington, N	!	11. SEC., T., R., M., OR BLK. AND SURVEY OR				
4. LOCATION OF V	VELL (REPORT LOCATIO	AREA	FOÉN DZW. NMDM				
below.)	1850' FNL - 790		Sec. 4 T26N R7W, NMPM  12. COUNTY OR PARISH 13. STATE Rio Arriba NM				
AT SURFACE: AT TOP PROD.							
AT TOTAL DEPT		14. API NO.					
16. CHECK APPROI	PRIATE BOX TO INDICA	ATE NATURE OF NOTICE	,				
REPORT, OR O		15. ELEVATIONS (SHOW DF, KDB, AND WD) 6603' GL, 6614' RKB					
REQUEST FOR APP	ROVAL TO: SUB	SEQUENT REPORT OF:		- ,			
TEST WATER SHUT FRACTURE TREAT SHOOT OR ACIDIZE							
REPAIR WELL		□ REC	(NOTE; Report re	esults of multiple completion or zone			
PULL OR ALTER C			change o	on Form 9-330.)			
MULTIPLE COMPLE	TE 📙	H SEP (	) Kijed				
CHANGE ZONES ABANDON*		$\exists$	1.				
(other) Plan	to Downhole Comm	ringte BUREAU OF LAN	aD = 1 . The second $a = 1$ , $a = 1$				
including estim	ated date of starting any	O OPERATIONS (Clearly st y proposed work. If well is Il markers and zones pertin	directionally drilled	tails, and give pertinent dates, , give subsurface locations and			

Ladd Petroleum Corp. plans to Downhole Commingle the production in this dually completed well by perforating the Dakota tubing string at  $\pm$  7000' RKB. This commingling has been approved by the Energy & Minerals Department, Oil Conservation Division Administrative Order No. &HC - 512.



SEP 13 1984

OIL CONI DAY

Subsurface Safety Valve: Manu. and Type		DIST. 3			
18. I hereby certify that the foregoing is signed		DATE	9-4-84	CEPTED FOR F	SECURD.
	(This space for Federal or State office	e use)	ACI		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE _		SEP 1319	384

FARMINGTON RESUURCE AREA