## UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

| 5. LÉASE<br>NM 25453<br>5. IF INDIAN, ALLOTTI | EE OR TRIBE NAME   |
|---|--|
|   | EE OR TRIBE NAME   |
| 5. IF INDIAN, ALLOTTI                         | EE OR TRIBE NAME   |
|   | •  |
| 7. UNIT AGREEMENT                             | NAME : 3 2 2   |
| B. FARM OR LEASE NA                           | ME   |
| Susco Federa                                  | <b>u</b>   |
| 9. WELL NO.                                   |  |
| D. FIELD OR WILDCAT                           | NAME   |
| 1. SEC., T., R., M., OR                       | BLK. AND SURVEY OF   |
| AREA<br>Sec. 9, T26N                          | I, R12W  |
| 2. COUNTY OR PARISI                           | H 13. STATE  |
| San Juan                                      | NM -   |
| 4. API NO.                                    | 7.5  |
| 5. ELEVATIONS (SHO                            | W DE KOR AND WO  |
| 6029' GR                                      |  |
|   | Susco Federa  9. WELL NO.  1  10. FIELD OR WILDCAT  11. SEC., T., R., M., OR AREA Sec. 9, T26N  22. COUNTY OR PARIS San Juan  4. API NO.  5. ELEVATIONS (SHO |

SUNDRY NOTICES AND REPORTS ON WEL (Do not use this form for proposals to drill or to deepen or plug back to a reservoir. Use Form 9–331–C for such proposals.) 1. oil gas well well other 2. NAME OF OPERATOR Southern Union Exploration Company 3. ADDRESS OF OPERATOR <u> 1217 **Main St., S**uite 400, Dallas, Tx 752</u> 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See sp below.) AT SURFACE: 1840' FSL & 1850' FEL AT TOP PROD. INTERVAL: 970' AT TOTAL DEPTH: 1365 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF N REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT TEST WATER SHUT-OFF RECEIVED FRACTURE TREAT SHOOT OR ACIDIZE JAN 27 (NODE) Report results of multiple completion or zone REPAIR WELL BUNEAU SELLENGE MERONING PULL OR ALTER CASING change on Form 9-330.) BUREAU OF LAND MANAGEMENT MULTIPLE COMPLETE FARMINGTON RESOURCE AREA CHANGE ZONES ABANDON\* (other) Name change of Operator as of 1-1-84

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.)\*

Name change of Operator has been changed as follows:

From: Southern Union Exploration Company of Tx

Southern Union Exploration Company

APR 02 1984

OIL CON. DIV. \ DIST. 3 Subsurface Safety Valve: Manu. and Type

.\_\_ \_ Set @ \_\_\_\_

18. I hereby certify that the foregoing is true and correct Drilling & Production THE \_ Engineer DATE January 20, 1984 SIGNED \_

(This space for Federal or State office use)

APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY

DATE

MAR 2.0 1084

\*See Instructions on Reverse Side

FARMINGIUN KESSUMUE AREA