5. LEASE

UNITED STATES

DEPARTMENT OF THE INTERIOR	SF 04/01/ B
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas (X)	Angel Peak "B"
well well other	9. WELL NO.
2. NAME OF OPERATOR	26-E 10. FIELD OR WILDCAT NAME
Supron Energy Corporation	Basin Dakota
3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
N. P. C.	Sec. 25, T-28N, R-11W, N.M.P.M.
AT SURFACE: 790 Ft./S; 790 Ft./E line AT TOP PROD. INTERVAL: Same as above	12. COUNTY OR PARISH 13. STATE San Juan New Mexico
AT TOTAL DEPTH: Same as above	14. API NO.
6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	A. A. H. H.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 5794 R.K.B.
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	13
TEST WATER SHUT-OFF	
RACTURE TREAT	
SHOOT OR ACIDIZE	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	
CHANGE ZONES	
ABANDON*	·
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	illectionally dillied, give appartiace locations and
. Spudded 12-1/4" surface hole at 9:00 P.M. 12	/10/80.
. Drilled 12-1/4" surface hole to total depth	
. Ran 6 joints of 8-5/8", 24.00#, H-40 casing	and set at 274 ft. R.K.B.
 Cemented with 250 sacks of class "B" with 3% down at 11:15 A.M. 12/11/80. Cement circula 	calcium chloride. Plug ted to surface.
. Waited on cement for 12 hours.	
Pressure - tested casing to 1000 P.S.I. for	15 minutes. Held OK.

_____ Set @ ____ Subsurface Safety Valve: Manu. and Type 18. I hereby/certify that the foregoing is true and correct Coddy TITLE Production Supt. DATE December 15 (This space for Federal or State office use) APPROVED BY _______CONDITIONS OF APPROVAL, IF ANY: _ TITLE _ DATE DEU 1 to 1980 *See Instructions on Reverse Side