## Form 9-331 Form Approved. Dec. 1973 Budget Bureau No. 42-R1424 UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR SF - 078244 **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 reservoir. Use Form 9-331-C for such proposals.) N/A 8. FARM OR LEASE NAME gas Taliaferro well $\mathbf{X}\mathbf{X}$ well other 9. WELL NO. 2. NAME OF OPERATOR #6 Supron Energy Corp. c/o Gordon L. Llewellyn 10. FIELD OR WILDCAT NAME 3. ADDRESS OF OPERATOR Suite 140, Campbell Centre Blanco Mesa Verde 8350 N. Central Expwy. Dallas, Texas 75206 11. SEC., T., R., M., OR BLK. AND SURVEY OR 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 **AREA** Sec. 30 T31N R12W AT SURFACE: 1090' FNL & 1080' FEL ( NW 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: San Juan New Mexico AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) SUBSEQUENT REPORT OF REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE 5. GEOLOGICANOTE: Report results of multiple completion or zone FARMINCTON. N. Change on Form 9–330.) REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other) 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.)\* Total depth 7 7/8" hole drilled to 5036'. Ran 131 joints (5017'), 4 1/2", 10.5#, K-55, R-3, ST&C casing Set and cemented at 5017'. Cemented w/1195 sacks 50/50 pozmix, 6% gel, 1/4# cello-flake Tailed in w/200 sacks Class B cement. Tailed in W/200 sacks class B cement. Test water shut-off to 2000# W/10", 900 series Shaffer Blow out $O_{S}$ S

| ubsurface Safety Valve: Manu. and Type   |                            | Se                 | Set @ Ft. |  |
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| 8. I hereby certify that the foregoing i | s true and correct         | ntendent DATE      | OCT COU   |  |
| AGOST TEU TOS PEDUMU                     | (This space for Federal or |                    |           |  |
| PPROVED BY                               | TITLE                      | DATE               |           |  |
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| FAHMINATON DISTRICT                      | *See Instructions on       | <i>□.</i> <b>3</b> |           |  |

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