

## 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.)

1. oil well ☐ gas well ☒ other ☐

2. NAME OF OPERATOR  
Cibola Energy Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 1668, Albuquerque, NM 87103

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE:  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input checked="" type="checkbox"/>
(other) Plug and Abandon	

5. LEASE  
NM-18611

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME  
Aciete Negra

8. FARM OR LEASE NAME  
Aciete Negra

9. WELL NO.  
2

10. FIELD OR WILDCAT NAME  
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 12-9S-27E

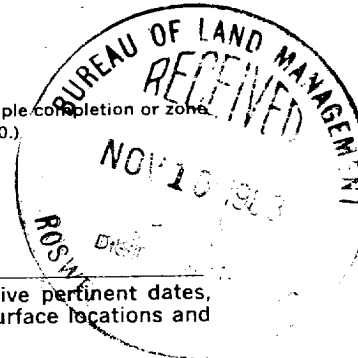
12. COUNTY OR PARISH  
Chaves

13. STATE  
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3891.0

(NOTE: Report results of multiple completion or zone change on Form 9-330.)



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.)\*

We circulated the hole with f/w gell and plugged as follows:

1st plug 2250' 35 sacks cmt  
2nd plug 1700' 50 sacks cmt  
3rd plug 1450' 35 sacks cmt  
4th plug 10 sacks at surface with dry hole marker.

The location will be cleaned off and leveled for inspection.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

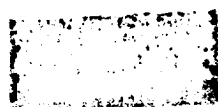
18. I hereby certify that the foregoing is true and correct

SIGNED Karen [Signature] TITLE Drilling Secretary DATE 11/4/83

APPROVED (Orig. Sgd.) PETER W. CHESTER (This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

MAY 18 1984



\*See Instructions on Reverse Side