orm 9–331	N Oll Cons. Commission	Form Approved. Budget Bureau No. 42–R1424
	rawer DD 5. LE	 ASL
DEPARTMENT OF THE	TERIOR NM 88210 NI	M-18611
GEOLOGICAL SURV	EY 6. IF	INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPO	RIS UN WELLS	NIT AGREEMENT NAME iete Negra
eservoir. Use Form 9–331–C for such proposals.)	DECEIVED BY 4 FA	ARM OR LEASE NAME iete Negra
1. oil well Well □ other   2. NAME OF OPERATOR	APR 29 1986	ELL NO.
Cibola Energy Corporati		IELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	ARTESIA, OFFICE	Ideat - Deconar
P.O. Box 1668, Albuquer	110, HI 07103 II. S	EC., T., R., M., OR BLK. AND SURVEY OR REA
4. LOCATION OF WELL (REPORT LOCATION	CLEARLY. See space 17	Sec. 12-9S-27E
below.) AT SURFACE: 330 FSL & 940	FEL 12. C	OUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:		Ives NM
AT TOTAL DEPTH:		PI NO.
I6. CHECK APPROPRIATE BOX TO INDICAT REPORT, OR OTHER DATA		LEVATIONS (SHOW DF, KDB, AND WD) 3880.2
REQUEST FOR APPROVAL TO: SUBS	EQUENT REPORT OF LAND	
TEST WATER SHUT-OFF	HILL RESOLUTION	a la
FRACTURE TREAT		NH CONTRACTOR
		Report results of multiple completion or zone
REPAIR WELL LI PULL OR ALTER CASING		Change on Form 9-330.)
MULTIPLE COMPLETE	APR 2 4 1986	
CHANGE ZONES		
ABANDON* (other) Well was SI tor work	over.	
		<u>c</u> 9
17. DESCRIBE PROPOSED OR COMPLETED including estimated date of starting any measured and true vertical depths for all	OPERATIONS Charty state of proposed work. If well is direction markers and zones pertinent to thi	adment details, and give pertinent dates, fally drilled, give subsurface locations and s work.)*
problems caused by the running engineering anal	cod string parting. lysis as well as met problem – Cibola an	se of continuous production Cibola is currently tallurgic analysis in ticipates switching out the as soon as we have more
Subsurface Safety Valve: Manu. and Type		Set @ Ft.
18. I hereby certify that the foregoing is true	and correct	
SIGNED Karen azar	TITLE Drilling Secre	
() () () () () () () () () () () () ()	his space for Federal or State office use	
APPROVED BY	TITLE	- DATE - APPROVED
CONDITIONS OF APPROVAL, IF ANY:		PETER W. CHESTER
		- 100Ec
		APRZJIOO
	*See Instructions on Reverse Side	APR 2 5 1986
	*See Instructions on Reverse Side	MANAGEMENT
1 the second	*See Instructions on Reverse Side	APR 2 J 1000 BUREAU OF LAND MANAGEMENT ROSWELL RESOURCE AREA

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