

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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
Basin Fuels, Ltd.

3. ADDRESS OF OPERATOR
300 W. Arrington, Suite 300, Farmington

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 300' FSL & 1650" FEL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

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

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐	☒ X
FRACTURE TREAT ☐	☐
SHOOT OR ACIDIZE ☐	☐
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.)*

Moved in rigged up rotary tools. Spudded well at 1000 hrs 9-14-78. Drilled 121" hole to 100'. Ran 100' 8 5/8" 20 lb/ft casing. Cemented with 100 gr class "B" with 2% C_aCl₂. Plug down 1730 hours 9-14-78. Good circulation through out job WOC 12 hours.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED John Alexander TITLE Agent DATE 9-14-78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

5. LEASE NM 7774	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME McCollum	
9. WELL NO. 3	
10. FIELD OR WILDCAT NAME Franciscan Lake MV	
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA 12-20N-6W	
12. COUNTY OR PARISH McKinley	13. STATE NM
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 6726 G.L.	

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