

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
DAKOTA RESOURCES, INC.
3. ADDRESS OF OPERATOR c/o Walsh Engr. & Prod. Corp.
P.O. Drawer 419 Farmington, N.M. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660'FNL, 660'FEL
AT TOP PROD. INTERVAL:
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 <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 type="checkbox"/> |
| (other) Additional Operations <input type="checkbox"/> | <input type="checkbox"/> |

5. LEASE
NM-15843-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Jeffrey Federal 30
9. WELL NO.
41
10. FIELD OR WILDCAT NAME
Undesignated Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 30-T17N-R9W
N.M.P.M.
12. COUNTY OR PARISH
McKinley
13. STATE
N.M.
14. API NO.
30-031-20727
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6988'GL

(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.)*

No additional operations are proposed at this time. (Reference, letter of April 15, 1982). The gas producing interval, Dakota, will remain shut in due to a gas gathering line not being present in the area of the well.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

FOR: DAKOTA RESOURCES, INC.
18. I hereby certify that the foregoing is true and correct

ORIGINAL SIGNED BY President Walsh Engr.
SIGNED EWELL N. WALSH TITLE & Prod. Corp. DATE 4/20/82
Ewell N. Walsh, P.E.

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

APR 22 1982

*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY _____

INMOCC