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 Co-mingled

2. NAME OF OPERATOR
W.B. Martin & Associates, Inc.

3. ADDRESS OF OPERATOR
2110 N. Sullivan, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 800'FNL and 800'FEL
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	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☐	☐
REPAIR WELL	☐	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☐	☐

(other) Case and Cement Intermediate

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6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.
#27 Martin-Whittaker

10. FIELD OR WILDCAT NAME
Wildcat S. Lindrith Gallup Dak Ext.

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NE¼ Sec. 6
T23N R4W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
NM

14. API NO.

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

RECEIVED

MAY 09 1984

BUREAU OF LAND MANAGEMENT
ALBUQUERQUE DISTRICT FARMINGTON AREA

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

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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.)*

5/07/84 Completed Operations:

Drilled 8 3/4" hole to 4960' with low solids, low water mud. RIH w/119jts of new J-55 23#/ft 7"OD Casing. Guide Shoe @ 4956'KB. Float Collar @ 4911'KB, cemented with 266ft^3 (175sxs) 50/50 poz 6% gel. Tail-in 440ft^3 (275sxs) thick set with 2% fluid loss additive. Cement top @ 1800'KB.

Proposed Operation: Wait on Cement 12hrs.

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

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

SIGNED _W.B. Martin_ TITLE Operator Representative DATE 5/08/84

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE - ACCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY

NMOCC

MAY 17 1984

FARMINGTON RESOURCE AREA
BY ____ SMW

*See Instructions on Reverse Side