

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
JACK A. COLE

3. ADDRESS OF OPERATOR
P. O. BOX 191, FARMINGTON, N.M. 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1830' GNL, 750' FWL
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:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☒
☐
☐
☐
☐
☐
☐
☐
☐

RECEIVED

AUG 27 1985

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

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

5. LEASE
SF-078362

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
MARCUS

9. WELL NO.
NO. 4

10. FIELD OR WILDCAT NAME
COUNSELOR GALLUP-DAKOTA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 5 - T23N-R6W

12. COUNTY OR PARISH
RIO ARriba

13. STATE
NEW MEX.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6983' GL, 6995' KB

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.)*

8/24/85 SPUD 12:45 P.M., T.D. 270'.
RAN 6 JTS, 8-5/8, 24.0 LB. J-55 ERW, 254.98' SET AT 266.98'.
CEMENTED WITH 230 SACKS CLASS "B", 3% CACL AND 1/4 LB.
FLOCELE PER SACK. PLUG DOWN 10:30 P.M. CIRCULATED
CEMENT TO SURFACE.

8/24/85 PRESSURE TEST CASING WITH 500 PSI. TEST OK.

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OIL & GAS
DIST. &
Set @ _____ Ft.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Danayne Blissett TITLE PROD. SUPT. DATE AUGUST 26, 1985

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

ACCEPTED FOR RECORD