

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 ☐ gas ☒ other ☐
well well
2. NAME OF OPERATOR
Mobil Oil Corporation
3. ADDRESS OF OPERATOR
9 Greenway Plaza, Suite 2700, Houston, TX 77046
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 890 FSL & 990 FWL
AT TOP PROD. INTERVAL: Same as surface
AT TOTAL DEPTH: Same as surface
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) <u>Perf. acidize and complete well</u>		

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.)*

TD 6900 PBTD 6765 Dakota perfs 6627-6765

7/1/79 - Testing

7/2/79 - Killed well w/75 bbls KCl wtr., POH, GIH w/3 jts tailpipe & Baker Lokset pkr, set pkr @ 6590 w/10,000# wtr. tbg. OE @ 6682, load annl/w/125 bbls. KCl wtr + 1% Baroid B-1400, NU tree, FL 3600, S 21 BLW/1hr, FL 2600.

7/3/79 - Continued testing through 7/8/79.

7/9/79 - Rel. Flint WS 10:30 AM & to production 6 AM.

7/10/79 - Continued testing through 7/17/79.

7/18/79 - SI for 1 pt POT build up test through 7/23/79.

7/24/79 - NM OCD POT: SI 7 days, TP/969, CP/O, F/9 BNO + 6 BLW/3hrs., 3/4 ck, GV/660 MCFGPD, TP 118, CP/O BP/45, CAOF/690 MCFGPD, Oil Grav. 45.6 @ 60.
DROP FROM REPORT pending gas PL connection.

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

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

SIGNED Robbie Jay TITLE Authorized Agent DATE 8-9-79

(This space for Federal or State office use)

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