UNITED STATES DEPARTMENT OF THE INTERIOR

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	5. LEASE Contract #42 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a difference servoir. Use Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME nt 8. FARM OR LEASE NAME
1. oil gas other Co-Mingled	
well well other co-wing real	9. WELL NO.
W.B. Martin & Associates, Inc.	#56 Martin-Whittaker 10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR 709 North Butler, Farmington, NM 87401	S. Lindrith Gallup-Dakota Ext. 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 1' below.) 	NW ¹ / ₂ Sec. 18/T24N/R4W
AT SURFACE: 985' FNL and 1120' FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH:	Rio Arriba NM 14. API NO
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE	
REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6663 GR
TEST WATER SHUT-OFF	
RACTURE TREAT	
SHOOT OR ACIDIZE REPAIR WELL T	(NOTE: Report recults of multiple completion or year
	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
MULTIPLE COMPLETE [] [] CHANGE ZONES [] [] ALICA	6.0400A
ABANDON* Asa & Camant Intermediate	3 01984
other) case a cement intermediate Bureau of Landing	INDESTRUCTIONS ON
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly st including estimated date of starting any proposed work. If well is rneasured and true vertical depths for all markers and zones pertin	tate all pertinent details, and give pertinent dates, and directionally drilled, give subsurface locations and
Completed Operations: 8/17/84 Drilled 8 3/4'low water loss mud. Ran 4975' of new K-55 23#, F.C. @ 4914'KB Stage Tool @ 2795'KB. Cement dadditives lead. Tail in 59ft Glass B 2% CaClepoz w/additives. Tail in 59ft Class B 2% CaCle	/ft 7" casing. G.S. @ 4949'KB,
	SEP 2 1 1984
	OIL CON. DIV.
Subsurface Safety Valve: Manu. and Type	DICT O
18. I hereby certify that the foregoing is true and correct	
SIGNED 115 Marty TITLE Operator	DATE 8/29/84
(This space for Federal or State	office use)
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	ACCEPTED FOR RECORD
	SEP 20 1984
*See Instructions on Reverse	FAKININGTUN RESUURUE AKEA

