

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
Cotton Petroleum Corporation
3. ADDRESS OF OPERATOR
3535 E. 30th- #202, Farmington, N.M. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE:
AT TOP PROD. INTERVAL: 718/5 2035/E
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	<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) Temporary gas line			

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.)*

Cotton Petroleum proposes to run a temporary gas line on top of ground from Apache #144 to Apache #107 to well the gas through the Apache #107 sales line to keep from venting gas during the test period.

5. LEASE Contract #129	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
7. UNIT AGREEMENT NAME NA	
8. FARM OR LEASE NAME Apache	
9. WELL NO. #144	
10. FIELD OR WILDCAT NAME Lindrith Gallup-Dakota W.	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13 T24N R4W	
12. COUNTY OR PARISH Rio Arriba	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) GL 6843	

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

RECEIVED
MAY 16 1985
OIL CON. DIV.
DIST. 3
Set @ _____ Ft.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED [Signature] TITLE Area Supt. DATE April 9, 1985

(This space for Federal or State office use)

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

APPROVED
AS AMENDED

*See Instructions on Reverse Side

NMOCC

MAY 14 1985
/s/ J. Stan McKee
for M. MILLENBACH
AREA MANAGER