

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Mallon Oil Company	8. FARM OR LEASE NAME Fisher Federal 2
3. ADDRESS OF OPERATOR 2750 Security Life Building, Denver, CO 80202	9. WELL NO. #1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' FNL & 790' FEL	10. FIELD AND POOL, OR WILDCAT Basin Dakota-Undes. Gallup
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 2, T25N, R2W
15. ELEVATIONS (Show whether OF, RT, OR, etc.) 7648' G.L.	12. COUNTY OR PARISH Rio Arriba
	13. STATE NM

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16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

4-19-85 Spud well @ 9:45 p.m. 4/18/85. Drill 273' of 12 1/4" surface hole. Ran 6 jts 9-5/8" 36#/ft surface casing (285 ft.). Set at 271 ft. RKB. Cemented surface casing with 171 ft³ (145 sx) Class B cement with 2% CaCl₂. Circulated cement to surface. WOC 12 hours.

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

SIGNED

Kevin H. McGold

TITLE Agent

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
DATE

APR 22 1985

*See Instructions on Reverse Side

NMOC

FARMINGTON RESOURCE AREA