

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
Mallon Oil Company

3. ADDRESS OF OPERATOR
2750 Security Life Building

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1850' FNL & 1670' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
7450' GL

5. LEASE DESIGNATION AND SERIAL NO.
NM 43753

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Post/Fed

9. WELL NO.
#13-6

10. FIELD AND POOL, OR WILDCAT
Gavilan Mancos/Gavilan
Greenhorn-Graneros-Dakota

11. SEC., T., R., M., OR BLK. AND
SUBV. OF AREA
Section 13, T25N, R2W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATES SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(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.)*

- 18-86 Spud well @ 4:30 p.m. 1-18-86. Drilled 13-3/4" surface hole.
- 19-86 Drilled 13-3/4" surface hole to 268'. Ran 6 jts of 9-5/8" 36#/ft J-55 new casing (256'), set @ 268' RKB. Rigged up Cementers, inc. Cemented surface with 295 ft³ (250 sx) Class B w/2% CaCl₂. Good circulation throughout job. Circulated cement to the surface. Plug down @ 1:15 p.m. 1-18-86. WOC 12 hours. Drilling 8-3/4" hole.
- 20-86 Drilling @ 1492'. Mud wt 8.5, Visc. 28, W.L. 10.0. 1/2° @ 782', 3/4° @ 1276'

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

SIGNED Kevin H. McCall

TITLE Agent

DATE 1-18-86

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side