

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
Curtis J. Little Oil & Gas
3. ADDRESS OF OPERATOR
P. O. Box 1258, Farmington, NM 87499
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2900' FNL & 1650' FEL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

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 checked="" 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)			

5. LEASE
SF-080539
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Hurt Federal
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Ojito Gallup-Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 1-T25N-R3W
12. COUNTY OR PARISH
Rio Arriba
13. STATE
NM
14. API NO.
30-039-24126
15. ELEVATIONS (SHOW DF, KDB, AND WD)
7320' GR

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

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.)*

Propose To: Change surface casing setting depth to 300'; change cement program to 160 sacks (189 cu.ft.)

RECEIVED
PLUMMER ROOM

87 JUL 27 AM 11:02

FARMINGTON RESOURCE AREA
FARMINGTON NEW MEXICO

AUG 03 1987
101 CON. DIV.
101123

Subsurface Safety Valve: Manu. and Type _____

18. Thereby certify that the foregoing is true and correct

SIGNED _____ TITLE Operator

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

Set @ _____ Ft.	
APPROVED	
DATE	7-23-87
DATE JUL 30 1987	
FARMINGTON RESOURCE AREA	

*See Instructions on Reverse Side

NMOCC