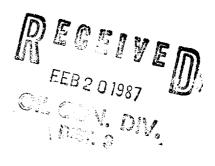
Form approved. Budget Bureau No. 1004-0135 crm 3160-5 UNITED STATES SUBMIT IN TRIPLICATE®
(Other instructions on re-Expires August 31, 1985 DEPARTMENT OF THE INTERIOR (Other in verse side) (November 1983) 5. LEASE DESIGNATION AND SERIAL NO (Formerly 9-331) BUREAU OF LAND MANAGEMENT 6 IF INDIAN, ALLOTTEE OR TRIBE NAME 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. 7. UNIT AGREEMENT NAME OIL WELL X WELL [OTHER 8. PARM OR LEASE NAME 2. NAME OF OPERATOR Mobil Producing TX & NM Inc. Featherstone Federal 3. ADDRESS OF OPERATOR 9. WELL NO. 9 Greenway Plaza - Suite 2700, Houston, TX 77046
Location of Well (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface 10. FIELD AND POOL, OR WILDCAT RECEIVED Gavilan Pictured Cliffs 11. SEC., T., E., M., OR BLE. AND SURVEY OR AREA 500 FEL & 990 FNL FEB 1 8 1987 Sec. 19, T-26N, R-2W 12. COUNTY OR PARISH: 13. STATE 15 ELEVATIONS (Show whether DF, RT, GR. etc.) 14. PERMIT NO. BUREAU OF LAND MANAGEMENT Rio Arriba NM FARMINGTON RESOURCE AREA Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data 16 NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL FRACTURE TREATMENT ALTERING CASING FRACTURE TREAT MULTIPLE COMPLETE SHOOTING OR ACIDIZING ABANDON MENT* SHOOT OR ACIDIZE ABANDON' REPAIR WELL CHANGE PLANS (Other) (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) Temporary Shut-in 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.) * Well was shut in 9-21-86 for pressure buildup. Request authority to retain well as temporarily shut in until pressure has built up enough for well to be produced.



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18. I hereby certify that the foregoing is true and correct SIGNED	TITLE Authorized Agent	DATE 2-13-87
(This space for Federal or State office use)		ACCEPTED FOR RECORD
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE 19 1987
es ·	See Instructions on Reverse Side	FARWINGTON MEDITUR AREA