5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR

| DEPARTMENT OF THE INTERIOR | Tract 251 Contract 000154 |
|--|--|
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| | Jicarilla Apache |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME |
| (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.) | |
| reservoir. Use Form 9-331-C for such proposals.) | 8. FARM OR LEASE NAME |
| 1. oil gas X other | Jicarilla Apache |
| well well other | 9. WELL NO. |
| 2. NAME OF OPERATOR | 16E |
| Marathon Oil Company | 10. FIELD OR WILDCAT NAME |
| 3. ADDRESS OF OPERATOR P. O. Box 2659, Casper, WY 82602 | Basin Dakota |
| The state of the s | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) | Sec. 34. T26N. R5W |
| AT SURFACE: 825' FNL & 955' FEL, Unit A | 12. COUNTY OR PARISH 13. STATE |
| AT TOP PROD. INTERVAL: | Rio Arriba New Mexico |
| AT TOTAL DEPTH: | 14. API NO. |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, | 30-039-22434 |
| REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WD) |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | 6,650' GL |
| TEST WATER SHUT-OFF | |
| FRACTURE TREAT | and the second section of the second section is a second section of the second section section section section |
| SHOOT OR ACIDIZE | |
| REPAIR WELL | (NOTE: Report results of multiple completion or zone change on Form-9-330.) |
| PULL OR ALTER CASING SEP 63 | Change on Pormission.) |
| CHANGE ZONES | and the second s |
| ABANDON* (other) Please See Below FAR-HINGTON | |
| (other) Prease See Below | Control Contro |
| 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.)* | |
| | |
| This wall was said 10 0 00 at 0.00 am 0 5/6 | 0H 26" K 55 |
| This well was spud 10-9-80 at 8:00 pm. 9-5/8 set at 492.17' w/450 sacks of cement. | 3", 36#, K-55 surface casing was |
| set at 492.17 .W/450 Sacks of Cement. | |
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| | The state of the s |
| | The same of the sa |
| Subsurface Safety Valve: Manu. and Type | Set @ Ft. |
| 18. I hereby certify that the foregoing is true and correct [hmilling] | |
| of itting | 9/,101 |
| SIGNED ME Sugar TITLE Superintender | 7C DATE //// 0/ |
| (This space for Federal or State office use) | |

NMOCC

*See Instructions on Reverse Side