

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
Marathon Oil Company

3. ADDRESS OF OPERATOR
P. O. Box 2659, Casper, WY 82602

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 825' FNL & 955' FEL, Unit A
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

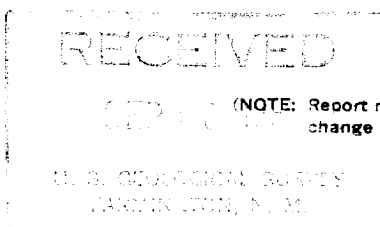
REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

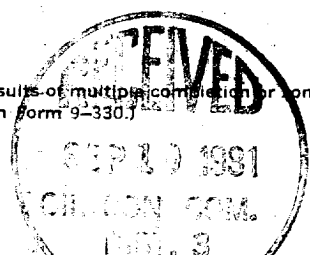
(other) Please See Below

SUBSEQUENT REPORT OF:

☐
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(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.)*

	Size	Weight & Grade	Footage	Set at	Sacks Cement	Top Cem.
Intermediate Csg.	7"	20#, K-55	3,500.65'	3,497.75'	600	2,700'
		23#, K-55	2,098.13'	5,600.88'		
Production Liner	4-1/2"	10.5#, K-55	2,097.68'	7,524.00' - From/250 5,413.22' - To		5,413'

Subsurface Safety Valve: Manu. and Type _____ Set: @ _____ Ft.

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

Drilling

SIGNED ME Bingham

TITLE Superintendent

DATE 9/1/81

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

BY ECS