

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 ☐ gas ☒ well other

2. NAME OF OPERATOR

Southern Union Exploration

3. ADDRESS OF OPERATOR

314 N. Auburn Drawer "F" Farmington, NM

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1000' FNL & 1850' 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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) 5½" liner

5. LEASE

Jicarilla E-10-E

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Contract #104

9. WELL NO.

E-10-L

10. FIELD OR WILDCAT NAME

Wildhorse Gallup/Basin Dakota

11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA

Sec. 22, T26N-R4W

12. COUNTY OR PARISH 13. STATE

Rio Arriba

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6805 GI

(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.)*

5½" Liner was run as follows:

TD of 7690 was reached 10:30 PM 6/8/82

Ran 107 Jts 4203.69', 5½" K55 R3 ST&C csg. Set from 3676 to 7890 RKB.

Cmt w/475 sks 50/50 poz mix, 2% Gel, 6% Halad 9. 3/4 - 1% CFR2.

Plug down 7:30 PM 6/9/82. Circ 8 bbls good cement.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

Lee Burton

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NMOCC

FARMINGTON DISTRICT

BY

Sm