Form Approved. Budget Bureau No. 42-R1424

UNITED STATES

5.	LEASE		
	NM	11930	

DEPARTMENT OF THE INTERIOR	NM 11930	
GEOLOGICAL SURVEY	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	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.)	8. FARM OR LEASE NAME	
1. oil gas	DOME FEDERAL 31-25-8	
well Well Other Dry Hole	9. WELL NO.	
2. NAME OF OPERATOR	1	
DOME PETROLEUM CORP.	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR 501 Airport Drive,	Wildcat/Dakota	
Suite #114, Farmington, New Mexico 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA	
below.) AT SURFACE: 1670' FNL, 1685' FEL	Sec. 31, T25N, R8W 12. COUNTY OR PARISH 13. STATE	
AT TOP PROD. INTERVAL:		
AT TOTAL DEPTH:	San Juan New Mexico 14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. Ari ito.	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6704 GR	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	0,04 (1)	
TEST WATER SHUT-OFF		
FRACTURE TREAT	යට මුත පාලකුකාල වරයිට යට ද සහ කුතියල්ව සහකි.	
SHOOT OR ACIDIZE	(NOTE: Report results of multiple completion or zone	
PULL OR ALTER CASING	change on Form 9–330.)	
MULTIPLE COMPLETE	• 5 5 5	
CHANGE ZOINES		
ABANDON* (other) Surface Reclamation	peneral suat GM	
Notice of Seeding X	GOOM, PL. M.	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertiner	irectionally drilled, give subsurface locations and	
The surface reclamation on the above location	has been completed and is ready	
for inspection. The pits have been backfilled	d, location cleaned up, contoured	
to conform to surrounding terrain, reseeded in	n compliance with BLM stipulations	
	. ta	
Subsurface Safety Valve: Manu. and Type	Set @ Ft.	
18. I hereby certify that the foregoing is true and correct	The state of the s	
SIGNED H. D. HOLLENGSWORTH TITLE Drlg. &Prod. Fo.	reman DATE Aug. 12, 1981	
(This space for Federal or State of	ice use)	
APPROVED BY TITLE	DATE ACCEPTED FOR RECORD	
CONDITIONS OF APPROVAL, IF ANY:		
	AUG 17 1981	
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