

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

FORM APPROVED

Budget Bureau No. 1004-0135

Expires March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT --" for such proposals.

SUBMIT IN TRIPLICATE

## 1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other:

## 2. Name of Operator

Mallon Oil Company

## 3. Address and Telephone No.

P.O. Box 3256, Carlsbad, NM 88220

(505) 885-4596

## 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1760' FSL and 1760' FEL (NW SE) Unit J

Sec. 5, T28N-R02W

## 5. Lease Designation and Serial No.

MDA 701-98-0013

## 6. If Indian, Allottee or Tribe Name

Jicarilla Apache Tribe

## 7. If Unit or CA, Agreement Designation

N/A

## 8. Well Name and No.

Jicarilla 28-02-05 No. 1

## 9. Well API No.

30-039-26098

## 10. Field and Pool, or Exploratory Area

E. Blanco, Pictured Cliffs

## 11. County or Parish, State

Rio Arriba County, New Mexico

## 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

## TYPE OF SUBMISSION

- ☐ Notice of Intent
- ☒ Subsequent Report
- ☐ Final Abandonment Notice

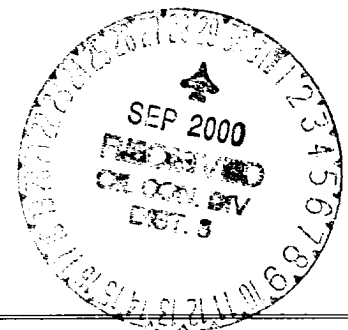
## TYPE OF ACTION

- ☐ Abandonment
- ☐ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☒ Other: Surface Pipe Change
- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ Dispose Water

(Note: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

## 13. 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 zone.)

**Mallon Oil Company is requesting that the surface pipe be changed from 500' to 250' on the above referenced well.**



## 14. I hereby certify that the foregoing is true and correct.

Signed

Gay Davis

Title

Office Manager

Date 9/18/00

(THIS SPACE FOR FEDERAL OR STATE OFFICE USE)

/s/ Brian W. Davis

Approved By

Title

Lands and Mineral Resources

SEP 27 2000

Conditions of approval, if any