AT TOTAL DEPTH:

SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES ABANDON\*

(other)

RUN PRODUCTION CASING

## UNITED STATES CEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

UNITED STATES	
	5. LEASE
CEPARTMENT OF THE INTERIOR	NM_14973
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
CUMPRY NOTICES AND DEPORTS ON WELLS	7. UNIT AGREEMENT 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 reservoir. Use Form 3-331-C for such proposals.)  1. oil gas well other	
	8. FARM OR LEASE NAME
	DOME FEDERAL 7-27-13
	9. WELL NO.
2. NAME OF OPERATOR	2
DOME PETROLEUM CORP.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR 501 Airport Drive	WAW FRUITLAND - PICTURED CLIFF
Suite 107, 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.)	SEC. 7, T27N, R13W
AT SURFACE: 820' FSL, 1850' FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PRCD. INTERVAL:	SAN JUAN NEW MEXICO

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

> (NOTE: Report results of multiple completion or zone change on Form 9-330.) E 2.

il bluche

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including est mated 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.)\*

Drilled to 1456'. Ran 47 jts., 1443', 2 7/8", 6.5# J-55 EUE casing. Casing landed at 1443' GL. Cemented with 125 sacks 65/35 Pozmix with 6% Gel and 1/4# Floseal/sack. Followed with 50 sacks class "B" cement with 2% CaCl and 1/4# Floseal/sack. Plug down at 4:00 PM, 07/13/79. Circulated cemen

14. API NO.

U. S. GEOLOGICAL SURVEY FARMINGTON, II. M

Subsurface Safety Valve: Manu. and Type

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

presignation DRILLING FOREMAN

DATE

July 16, 1979

Set @

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF AFPROVAL, IF ANY \_ TITLE \_

DATE

\*See Instructions on Reverse Side

