1 File

Form Approved. Budget Bureau No. 42-R1424

Form	9-331
D	1072

## UNITED STATES

<u>i</u>	545811
5. LEASE	
NM 16476	
6. IF INDIAN, ALL	OTTEE OR TRIBE NAME
7. UNIT AGREEM	ENT NAME

DEPARTMENT OF THE INTERIOR	NM 104/0			
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
SUNDRY NOTICES AND REPORTS ON WELLS	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 Bengal C			
1. oil gas XX other	9. WELL NO.			
2. NAME OF OPERATOR  Jerome P. McHugh	10. FIELD OR WILDCAT NAME			
3. ADDRESS OF OPERATOR P O Box 208, Farmington, NM 87401	WAW Fruitland PC  11. SEC., T., R., M., OR BLK. AND SURVEY OR			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Sec 36 T27N R13W			
below.) AT SURFACE: 1770' FNL - 1100' FWL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE San Juan NM			
AT TOTAL DEPTH:	14. API NO.			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)			
REQUEST FOR APPROVAL TO:  SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF				
FRACTURE TREAT	(NOTE: Report results of multiple completion or zone			
REPAIR WELL	change on Form 9–330.)			
CHANGE ZONES  ABANDON*  Additional Lesting				
ABANDON* (other) XX Additional Testing  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state)	te all pertinent details, and give pertinent			

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.)\*

Request permission to conduct additional swabbing and evaluation. We feel that this well is capable of producing significant quantities of natural gas with more swabbing and testing.



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Subsurface Safe	ty Valve: Manu. and Type				_	
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	reman & Commen	Agont	DATE _	1-6-82		
SIGNED	O SHETTERAN TO LUCATION					
	The Like Chan	ace for Federal or State office	use)			
APPROVED BY CONDITIONS OF	APPROVAL IF ANY	TLE	Onic			
ur 2	For JAMES F. SIMS	NWOCC		<i>:</i> .		