Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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 well [X] gas well [ ] other

2. NAME OF OPERATOR
John Staver

3. ADDRESS OF OPERATOR c/o Pohlmann & Associates, 200 Petroleum Plaza Bldg., 3535 E. 30th St., Farmington, New Mexico 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: ~~1982~~ 920' FNL & ~~729~~ 1268' FWL, Sec. 3
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
I-89 Ind. 0600 57

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo Tribal

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Table Mesa

9. WELL NO.
8

10. FIELD OR WILDCAT NAME
Table Mesa

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 3, T.27N., R.17W.

12. COUNTY OR PARISH 13. STATE
San Juan New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5369' GL

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	[X]
FRACTURE TREAT	[ ]
SHOOT OR ACIDIZE	[ ]
REPAIR WELL	[ ]
PULL OR ALTER CASING	[ ]
MULTIPLE COMPLETE	[ ]
CHANGE ZONES	[ ]
ABANDON*	[ ]
(other) Cement off water zone	[ ]

(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.)*

1. MIRU Fmtn. Well Serv.
2. Run 2-3/8" tbg. to T.D. 1462'.
3. Cement open hole from 1462' to 1386'.
4. Swab test for water shut-off.

RECEIVED
OCT 21 1981
OIL CON. COM.
DIST. 3

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED M. Seelinger TITLE Agent DATE 9/14/81

(This space for Federal or State office use)

APPROVED BY [signature] TITLE Acting Dist. Supv. DATE OCT 19 1981
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC