

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. SF - 078357	
2. NAME OF OPERATOR Superior Oil Company, The		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 9 Greenway Plaza, Ste 2700, Houston, TX 77046		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1120 FNL & 1110 FEL		8. FARM OR LEASE NAME Marshall	
14. PERMIT NO.		9. WELL NO. 2E	
15. ELEVATIONS (Show whether DF, WT, GR, etc.) KB - 6149		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15, T-27N, R-9W	
		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Temporary Abandon <u>Shut-in</u>		(Note: Report results of multiple completion on Well Completion or Re-completion Report and Log form.)	

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.)*

This well was shut in 12-28-84.

Request authority to retain well as Shut-in temporarily abandoned as we are unable to secure a gas contract at present time.

18. I hereby certify that the foregoing is true and correct		MOBILE PRODUCING TX & NM, INC. AS AGENT FOR THE SUPERIOR OIL COMPANY	
SIGNED <u>Nancy Lewis</u>	TITLE	DATE 3-12-86	
(This space for Federal or State office use)		ACCEPTED FOR RECORD	
APPROVED BY	TITLE	DATE	
CONDITIONS OF APPROVAL, IF ANY:		MAR 18 1986	

*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA

BY E-23