

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 gas ☒ well other ☐
2. NAME OF OPERATOR
Marathon Oil Company
3. ADDRESS OF OPERATOR
P.O. Box 2659, Casper, WY 82602
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1,120' FSL & 790' FWL
AT TOP PROD. INTERVAL: Unit M
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT ~~ORXAXORX~~ ☒
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

(other) Fracture Stimulate

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE
NM-020501
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Ohio "C" Government
9. WELL NO.
3-E
10. FIELD OR WILDCAT NAME
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 26, T28N, R11W
12. COUNTY OR PARISH 13. STATE
San Juan New Mexico
14. API NO.
30-045-24335
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5,666' GL, 5,676' KB

RECEIVED
APR 7 1983

U.S. GEOLOGICAL SURVEY
FEDERAL BUREAU OF REVENUE
WASHINGTON, D.C.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)
JUN 28 1983

RECEIVED

OIL CON. DIV.
DIST. 3

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.)*

We propose to perforate and fracture stimulate the Graneros Sand (6,068'-6,078' KB) with a 70 quality foam and approximately 45,000 pounds of sand. The Graneros will then be commingled with the currently producing Dakota Formation.

This proposed work is scheduled for the second quarter of 1983.

RECEIVED

APR 15 1983
CASPER DISTRICT
OPERATIONS
GOVERNMENT COMPLIANCE

Subsurface Safety Valve: Manu. and Type

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

District

SIGNED

Dale T. Caddy

TITLE

Operations Manager

DATE

April 4, 1983

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APR 11 1983
James E. Smith
JAMES E. SMITH
DISTRICT ENGINEER

*See Instructions on Reverse Side

OPERATOR

CAB