

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: 1,570' FSL & 1,660' FWL
AT TOP PROD. INTERVAL: Unit K
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 ~~XXXXXXXX~~ ☒
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Frac Stimulate

SUBSEQUENT REPORT OF

RECEIVED

APR 7 1983

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

5. LEASE
NM-020500

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Ohio "A" Government

9. WELL NO.
2-E

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 23, T28N, R11W

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

14. API NO.
30-045-24358

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5,555' GL, 5,565' KB

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 abandon the Upper Dakota Sand (6,082'-6,118' KB) and perforate and fracture stimulate the Graneros Sand (5,995'-6,009' KB) with a 70 quality foam and approximately 45,000 pounds of sand. Due to the excessive water production from the Dakota, this zone will be isolated with a cement retainer and the perforations will be cement squeezed.

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

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

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 _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
~~AS AMENDED~~

APR 11 1983
JAMES F. SIMS
DISTRICT ENGINEER

*See Instructions on Reverse Side

NMOCC