

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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"/> OTH R		5. LEASE DESIGNATION AND SERIAL NO. SF 078763
2. NAME OF OPERATOR Shar-Alan Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 1402 Denver U. S. Nat'l Center, Denver, Colorado 80202		7. UNIT AGREEMENT NAME Rosa Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 575' from the North line and 1300' from the West line		8. FARM OR LEASE NAME CARSON
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6,518.1		10. FIELD AND POOL, OR WILDCAT Basin-Dakota
		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA 10 - 31N - 5W
		12. COUNTY OR PARISH Rio Arriba
		13. STATE New Mexico

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"/>	FULL 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) <input type="checkbox"/>

(Other) **Supplemental Report to Completion Report** (Note: Report results of multiple completion on Well Completion or Recompletion 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.)*

To supplement completion report dated 6-3-66.

Electric log tops as follows:

Pictured Cliffs	3658'
Nasa Verde	4920'
Mancos Shale	6400'
Gallup	6630'
Greenhorn	7930'
Dakota	8162'

RECEIVED

JUN 9 1966

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

RECEIVED
JUN 10 1966
OIL CON. COM.
DIST. 3

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

SIGNED

TITLE **Mgr. of Lands & Explorations** DATE **6-8-66**

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side