(other)

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.)

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NM 03563.	NM -33048			
6. IF INDIAN, A	LLOTTEE OF	RTRIBE	NAME	. '
	5030	<u> </u>	,	
7. UNIT AGRE	EMENT NAM	E ć.	- d -	
	4 24	Ę.	<u>- </u>	
8. FARM OR LI	EASE NAME	1961		
GAGE FEDE!	MI N	Ξ	و 🕏 💆	
9. WELL NO.	- 6 ±	<u>e</u>		
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10. FIELD OR W			= : ;	
BASIN DAKO	DTA - BLA	NCO	MESA	VERDE
.11. SEC., T., R.,	M., OR BLK	. AND	SURVE	Y OR
l area		c 2	: :	

1.	oil well		gas well	X	othe	r	 	
			OPERAT ROLEU					
	1660	Lin	<u>-</u>	2800			 80264 Denver,Col	
4.	belov			L (REP			Y. See spac e 1 7	'

EXTENSION OF DRILLING APPLICATION

20-30N-10W: 12. COUNTY OR PARISH 13. STATE NEW MEXICO SAN JUAN

14. API NO.

AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: same 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,

15. ELEVATIONS (SHOW DF, KDB, AND WD) 6385 GL

8

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*

REPORT, OR OTHER DATA

A Journal Prich and (NOTE: Report results of multiple completion or zone change on Form 9-330.) -÷ ? 1

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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.)*

Mesa Petroleum requests an extension of the Application for Permit to Drill, dated 07/06/78.

Economics did not allow this project to be completed during the past year. Mesa intends to commence operations within the six month extension period.

Fŧ Subsurface Safety Valve: Manu. and Type _ . . 3 1 7 5 18. I hereby certify that/the foregoing is true and correct AGENT DATE TITLE SIGNED (This space for Federal or State office use) DATE APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

APPROVED

See Instructions on Reverse Side

NOCC

ACTING DISTRICT ENGINEER

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