

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  
Jerome P. McHugh
3. ADDRESS OF OPERATOR  
Box 208, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1790' FSL - 890' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)			

5. LEASE  
NM 6899
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Pinon
9. WELL NO.  
#1E
10. FIELD OR WILDCAT NAME  
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 13 30N R14W
12. COUNTY OR PARISH  
San Juan
13. STATE  
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5938' GL

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

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.)\*

Pursuant to your notice of June 11, 1980 regarding the electrical logs on the above well, our records and GO Wireline's distribution show 2 logs mailed to your office.

ACCEPTED FOR RECORD  
JUN 11 1980  
BY *[Signature]*

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED *[Signature]* TITLE Agent DATE 6-19-80

(This space for Federal or State office use)

APPROVED BY TITLE DATE  
CONDITIONS OF APPROVAL, IF ANY:

~~FAVORABLE COPY~~

NM0001

WIRELINE SERVICES  
GEORGE HART - OWEN

GO WIRELINE SERVICES

PRINT DISTRIBUTION LIST

CUSTOMER \_\_\_\_\_ Field \_\_\_\_\_

Well Name \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_

Type of Logs Distributed \_\_\_\_\_ Date \_\_\_\_\_

This Distribution List Authorized By \_\_\_\_\_

Original Log(s) Retained by GO Wireline Services, Pending Possible Other Runs ☐

The Original Log(s) and Distribution List Sent to:

Company \_\_\_\_\_

Person \_\_\_\_\_

Address \_\_\_\_\_

No. Of  
Copies  
Of Each  
Log

No. Of  
Copies  
Of Each  
Log

COMPANY  
PERSON  
ADDRESS

Thomas L. McHugh  
1000 Cherry St. Suite 1020  
Denver, CO 80202

COMPANY  
PERSON  
ADDRESS

COMPANY  
PERSON  
ADDRESS

Smith Production Corporation  
10000  
Newington, N.M. 87401

COMPANY  
PERSON  
ADDRESS

COMPANY  
PERSON  
ADDRESS

W. L. Gas Company  
10000  
Newington, N.M. 87401

COMPANY  
PERSON  
ADDRESS

COMPANY  
PERSON  
ADDRESS

W. L. Gas Co.  
10000  
Newington, N.M. 87401

COMPANY  
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