Cipc. 1973	4 Budget Bureau No. 42-R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	NM=27024
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME,
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.)	7. UNIT AGREEMENT NAME N/A
reservoir, use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas y well other	MESA TWIN MOUNDS - 31
2. NAME OF OPERATOR	9. WELL NO. " #1
LOBO PRODUCTION	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	WC Gallup-Basin Dakota
P.O. Box 2364, Farmington, New Mex 87499	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.) 990 FNL and 940 FWL	Section 31, T 30N, R 14W
AT SURFACE:	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH: Same	San Juan New Mex.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	14. API NO.
REPORT, OR OTHER DATA	
	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT SHOOT OR ACIDIZE SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone AGEMEN Tchange on form 9-330.)
PULL OR ALIER CASING "OD 7.1) 19"	change on Porm 9–330.)
MULTIPLE COMPLETE \Box \Box μ P κ *	AGEMEN
CHANGE ZONES CHANGE ZONES CHANGE ZONES CHANGE ZONES	CE A
MULTIPLE COMPLETE APROCES CHANGE ZONES ABANDON* (other) Remedial work FARMINGTON RESOUR	
Surface casing and cement	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinen	rectionally drilled, give subsurface locations and
4-13-84Aztec Well Service moved on locati	on. Spud well at 4:30 p.m.
Drilled to 218'. Ran 5 jts. of 8	
Set at 214' KB. Cemented w/140 sk	
1/4 # flocele and 2 % CaCl. Circu	
Plug down at 12:50 a.m.	Say 19 A Cag E
4-14-84 WOC 12 hours. Pressure tested BO	P & Casing 600#. Held
	\$ 5 5 5 5 5 5 5 5 5 5
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	문화생 취임 사용 요즘 그림을 다
Subsurface Safety Valve: Manu. and Type	
	Set W
18. I hereby certify that the foregoing is true and correct	4 16 94
SIGNED (Exacuttion TITLE Operator	4-16-84
(This space for Federal or State offi	ice use)
APPROVED BY TITLE	DATE THE PARTY OF
CONDITIONS OF APPROVAL, IF ANY:	
RECEIVED *See Instructions on Reverse S	ACCEPTED FOR RECORD
iUI	FU B & A 100A

OIL CON. DIV.

APR 2 5 1984

NMOCC

APR 24 1984

FARMINGIUN RESOURCE AREA