

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
Koch Exploration Co (Div of Koch Ind., Inc.)

3. ADDRESS OF OPERATOR
P.O. Box 2256; Wichita, Kansas 67201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1030' FSL & 870' FEL
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) Run Intermediate Casing	<input type="checkbox"/>		<input type="checkbox"/>

5. LEASE
NM 013642

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
N/A

7. UNIT AGREEMENT NAME
N/A

8. FARM OR LEASE NAME
Gardner

9. WELL NO.
4-A

10. FIELD OR WILDCAT NAME
Blanco/Mesa Verde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 25-32N-9W

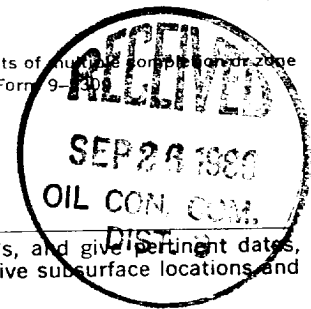
12. COUNTY OR PARISH
San Juan

13. STATE
NM

14. API NO.
N/A

15. ELEVATIONS (SHOW DF, KDB, AND WD)
GR 6670

(NOTE: Report results of any test for completion or change on Form 9-331-C)



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.)*

Drilled 8-3/4" hole from 218' to 3465'. Ran 91 jts 7" 20, 23 & 26# K-55 IT&C SH casing. Set casing @ 3542'. Cmtd w/375 sx lite w/1/4# Flocele & 100 sx class "B" w/1/4# Flocele and 2% CaCl/sk. PD @ 3:05 AM 9-15-80. Cement Circulated.

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

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

SIGNED Ernest L. Schmidt TITLE Operations Manager DATE 9-18-80

(This space for Federal or State office use)

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

BY BW