

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
Supron Energy Corp c/o John H. Hill, et al
3. ADDRESS OF OPERATOR Suite 020, Kysar Bldg.
300 West Arrington, Farmington, N.M. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FSL + 1790' FWL (SE SW)
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

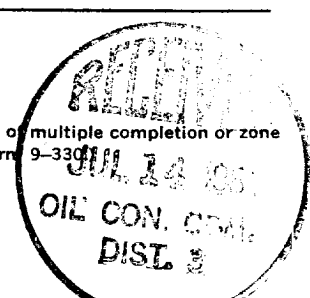
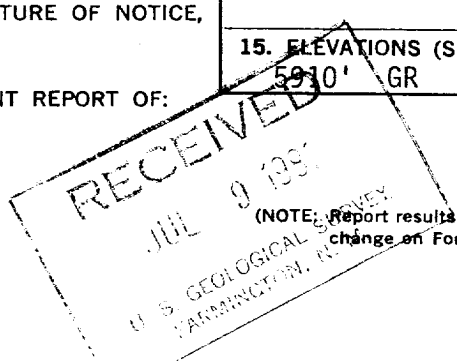
REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☒
☐
☐
☐
☐
☐
☐
☐

5. LEASE
SF-078818A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
N/A
7. UNIT AGREEMENT NAME
N/A
8. FARM OR LEASE NAME
USA
9. WELL NO.
#4
10. FIELD OR WILDCAT NAME
Mesa Verde
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 24 T32N R13W
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5910' GR



(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.)*
1. Frac'd Mesa Verde (4484' - 4626') with 38, 136 gallons 75% Quality Foam, 2% KCL, 140,000# 20/40 sand, and 2,270,000 SCF Nitrogen.
2. Maximum treating pressure 2200 PSI, Minimum treating pressure 2000 PSI, average treating pressure 2100 PSI, ISDP 1700 PSI, Final Shut in pressure 1600 PSI in 15 minutes. Job completed at 2:56 P.M., 7/3/81.

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

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

SIGNED Herman V. Wallis TITLE Exploration Development Superintendent DATE July 7, 1981

(This space for Federal or State office use)

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

NMOCC

*See Instructions on Reverse Side

JUL 09 1981

FARMINGTON DISTRICT
Herman V. Wallis