

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
WTR Oil Company
3. ADDRESS OF OPERATOR
Drawer LL, Cortez, Colo 81321
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 330'FWL 2309'FNL, Unit E, Sec 35, T32N
AT SURFACE: R17W.
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) New Well

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐
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☒

RECEIVED

OCT 19 1982

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

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

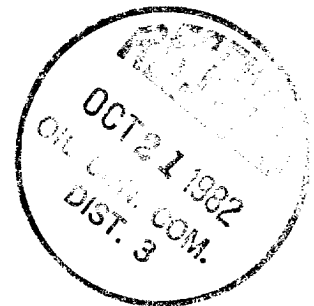
5. LEASE
14-20-600-3540
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Navajo P
9. WELL NO.
17
10. FIELD OR WILDCAT NAME
Gallup Many Rocks
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW $\frac{1}{4}$, NW $\frac{1}{4}$, Sec. 35, T32N. R17W
12. COUNTY OR PARISH 13. STATE
San Juan New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
GL 5786.1

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.)*

10-15-82

Started test on new well

24HR test 18 BBL Oil - 110 BBL Water - Gas tstm.
Oil is saleable product.



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

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

SIGNED Lee E. Sealey TITLE Office Manager DATE 10-19-82

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

NMOCC

*See Instructions on Reverse Side

OCT 19 1982

FARMING
BY Smm