

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 ☐ gas ☒ well ☐ well ☒ other ☐

2. NAME OF OPERATOR  
AMOCO PRODUCTION COMPANY

3. ADDRESS OF OPERATOR  
501 Airport Drive Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
840' FNL x 1700' FEL, Section 25,  
AT SURFACE: T-28-N, R-9-W  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

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

5. LEASE  
14-20-603-779

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Navajo Allottee

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Kayasyahi

9. WELL NO.  
1

10. FIELD OR WILDCAT NAME  
South Blanco Pictured Cliffs

11. SEC. T., R., M. OR BLK. AND SURVEY OR AREA  
NW/4 NE/4 Section 25,  
T-28-N, R-9-W

12. COUNTY OR PARISH  
San Juan

13. STATE  
NM

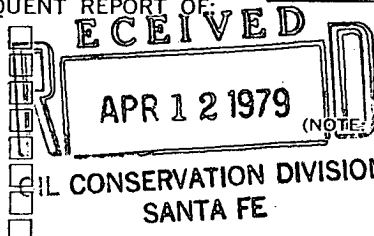
14. API NO.  
30-045-107193

15. ELEVATIONS (SHOW DEPT. KDB AND WD)  
5857 GL

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:



(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.)\*

Amoco Production Company proposes to repair a suspected casing leak as follows:

- 1) Locate the casing leak.
- 2) Cement with 600 sx Class "B" Neat cement and circulate to surface
- 3) Drill cement and bridge plug.
- 4) Run new 2-3/8" tubing with a model "F" packer set above perfs.

Verbal approval obtained per conversation McGrath/Fackrell on 4/3/79.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

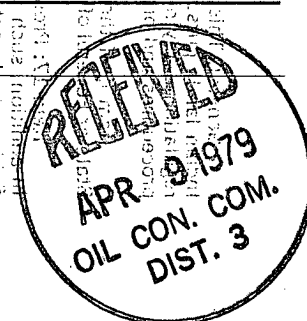
SIGNED R. L. HIATT TITLE Adm. Supvr. DATE 4/4/79

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side



Wymoc