

Form 9-331  
(May 1963)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

LEASE DESIGNATION AND SERIAL NO.

N00-C-14-20-3007

IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Allotted

UNIT AGREEMENT NAME

FARM OR LEASE NAME

Maxwell Bah-e

WELL NO.

1

FIELD AND POOL, OR WILDCAT

Lone Pine

SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 18, T17N, R8W

COUNTY OR PARISH

McKinley

STATE

N. M.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Gilbert Maxwell

3. ADDRESS OF OPERATOR

Box 234, Farmington, N. M. 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)

At surface

1980' fs1 660' fw1

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6926' Gr.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETION ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

12/15/70

Ludwick Drilling Co. spudded 12 1/4" hole 11:00 a.m., drill to 108', ran 3 jts. 8 5/8" O.D., 24#, J-55, 8R ST&C casing set at 107' Young Drilling Co. R.K.B. Cemented with 75 sx. Class "A" 2% Cacl. Good cement to surface.

12/18/70

T.D. 2755'. Ran Schlumberger Dual Induction-Laterolog and Gamma Ray-Caliper-Compensated Density Log. Log T.D. 2757'. Ran 84 jts. 5 1/2" O.D., 14#, K-55, 8R ST&C, CF&I casing. T.E. 2741.00' set at 2752.00' R.K.B. Cemented with 75 sx. Class "A", 40% Diacel "D" plus 100 sx. Class "C" with 7 1/2# salt per sx. P.O.B. at 9:10 p.m., 12/17/70. Good mud returns while cementing. Max. cementing pressure, 600 psi. Worked casing while cementing. Bumped plug with 2000 psi. Baker float would not hold - left pressure on casing.

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

SIGNED

Original signed by M. A. Dumas

TITLE

Engineer

DATE

12/31/70

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

m 9-331  
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5. LEASE DESIGNATION AND SERIAL NO.

N00-C-14-20-3007

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Allotted

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Maxwell Bah-e

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Lone Pine

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 18, T17N, R8W

12. COUNTY OR PARISH

McKinley

13. STATE

N. M.

## 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 "APPLICATION FOR PERMIT—" for such proposals.)1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Gilbert Maxwell

3. ADDRESS OF OPERATOR

Box 234, Farmington, N. M. 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

1980' fsl 660' fwl

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

6926' Gr.

16.

## Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

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

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

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.)\*

12/26/70

P.B.T.D. 2713'. Ran Go International's Gamma Ray-Collar log. Log T.D. 2713'. Perforated 2687'-92' (5') with 2 SPF, 10 holes, Densi Jet XVIII. Ran 87 jts. 2 3/8" O.D., 4.7#, J-55, 8R, EUE internally plastic coated tubing. T.E. 2701.03' set at 2711' R.K.B. Acidized with Western Company with 750 gals. 15% HCl with non-emulsion and iron control additive. Breakdown pressure 1800#, Max. 1800#, Min. 700#. Ave. pressure 900#, Initial shut down pressure 950#. Final shut-in pressure 100# in 5 min. Ave. injection rate 0.5 bbls/min.

Flushed with 10.5 bbls. of water. Swabbed back acid water 2 hrs. Shut well in.

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

SIGNED Original signed by T. A. Dugan

TITLE

Engineer

DATE 12/31/70

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side