

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 ☒ Water Injection

2. NAME OF OPERATOR
Basin Fuels

3. ADDRESS OF OPERATOR
Suite 300; 300 W. Arrington; Farmington, NM

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660 FSL and 1980 FEL
AT TOP PROD. INTERVAL: SAME
AT TOTAL DEPTH: SAME

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) Convert to Injection <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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.)*

2-7-78 Moved in and Rigged up Farmington Well Service Rig #15 WIH and drilled cement from 2781 to 2811. Drilled formation from 2811 to 2888. Rigged up wire-line company. Ran Gamma Ray log from 2888 to 2700. Perforated 2776 to 80 and 2792-96. Ran 3 jts. 2 7/8" slotted liner and set from 2695 to 2888.

WIH with Baker Loc-Set packer and 2 3/8" internally coated tbq. to 2676. Spotted 28 bbl. oil in annulus and set packer at 2676 with 10,000 psi tension. Rigged up Halliburton and acidized perfs. and open hole with 1000 gallons 15% HCl. Rigged down completion unit and Moved off location. Wait on electricity to install injection pump.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED William T. Jones TITLE AGENT

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

5. LEASE
NM 0555841

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Slick

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Franciscan Lake Mesa Verde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 7-T20N-RSW

12. COUNTY OR PARISH
McKinley

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6742 GR

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

