

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Contract No. 360	
2. NAME OF OPERATOR JACK A. COLE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
3. ADDRESS OF OPERATOR P. O. Box 191 Farmington, New Mexico 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850'FSL, 990'FEL		8. FARM OR LEASE NAME Chacon Amigos	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7138'GL, 7151'DF, 7152'KB		10. FIELD AND POOL, OR WILDCAT Chacon Dakota Associated	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 2-T22N-R3W N.M.P.M.	
		12. COUNTY OR PARISH Sandoval	
		13. STATE N.M.	

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.)*

SEE ATTACHED FOR FRACTURE TREATMENT.



ACCEPTED FOR RECORD

OCT 25 1980

WASHINGTON, D.C.

BY

FOR: JACK A. COLE

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

SIGNED

Dewayne Blancett
Dewayne Blancett, Production Foreman

TITLE

Walsh Engineering &
Production Corp.

DATE

10/21/80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

11/10/80

Date 10/15/80

Correlation Log Type GR-CCL From 7040 To 6913

Perforations 6928'-6935'; 6937'-6943'

2 Per foot type 3-1/2" Glass Strip Jets

Pad 7,000 gallons. Additives 1% Kcl. 2 lbs.
FR-20 per 1000 gallons. 1 gallon Frac Flo per
1000 gallons. 15 lbs. Adomite per 1000 gallons.

Water	<u>40,000</u>	gallons.	Additives	<u>1% Kcl.</u>	<u>2</u> lbs.
	<u>FR-20 per 1000</u>	<u>gallons.</u>	<u>15 lbs.</u>	<u>Adomite per</u>	
	<u>1000 gallons.</u>				

Sand	<u>40,000</u>	lbs.	Size	40/60
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Flush 5,500 gallons. Additives 1% Kcl. 2 lbs.
FR-20 & 1 gallon Frac Flo per 1000 gallons.
15 lbs. Adomite per 1000 gallons.

Breakdown 3500 psig

Ave. Treating Pressure 3100 psig

Max. Treating Pressure 3250 psig

Ave. Injection Rate 30 BPM

Hydraulic Horsepower	2279	HHP
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Instantaneous SIP 2000 psiq

5 Minute SIP 1750 psig

10 Minute SIP 1650 psig

15 Minute SIP 1600 psig

Ball Drops:

-0-	Balls at	-0-	gallons	-0-	psig
					increa
	Balls at		gallons		psig
					increa
	Balls at		gallons		psig
					increa

Remarks:

Formation Dakota "A" Stage No. 2 Date 10/16/80
Operator JACK A. COLE Lease and Well Chacon Amigos No.2
Correlation Log Type _____ From _____ To _____
Temporary Bridge Plug Type _____ Set At _____
Perforations 6825'-6848'; 6850'-6874'
1 Per foot type 3-1/2" Glass Strip Jet
Pad 10,000 gallons. Additives 1% Kcl. 2 lbs.
FR-20 per 1000 gallons. 1 gallon Frac Flo per
1000 gallons. 15 lbs. Adomite per 1000 gallons.
Water 80,000 gallons. Additives 1% Kcl. 2 lbs.
FR-20 per 1000 gallons. 15 lbs. adomite per 1000
gallons.
Sand 80,000 lbs. Size 20-40
Flush 4,900 gallons. Additives 1% Kcl. 2 lbs.
FR-20 per 1000 gallons.
Breakdown 2700 psig
Ave. Treating Pressure 3300 psig
Max. Treating Pressure 3500 psig
Ave. Injecton Rate 41 BPM
Hydraulic Horsepower 3316 HHP
Instantaneous SIP 1000 psig
5 Minute SIP 900 psig
10 Minute SIP 880 psig
15 Minute SIP 850 psig
Ball Drops: -0- Balls at -0- gallons -0- psig
inerea
 Balls at gallons psig
inerea
 Balls at gallons psig
inerea

Remarks: _____