

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
Aztec Energy Corporation
3. ADDRESS OF OPERATOR
1206 East 20th Street, Farmington, N.M. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' F.N.L. and 990' F.E.L.
AT TOP PROD. INTERVAL: 790' F.N.L. and 990' F.E.L.
AT TOTAL DEPTH: 790' F.N.L. and 990' F.E.L.

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) ☐

SUBSEQUENT REPORT OF:

- ☐
☒
☒
☐
☐
☐
☐
☐
☐
☐

RECEIVED

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

5. LEASE

Contact 417

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla "O"

9. WELL NO.

#2

10. FIELD OR WILDCAT NAME

Chacon Dakota Extension

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

Sec. 10, T. 22 N., R. 3 W.

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mexico

14. API NO.

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

7084 G.R.

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.)*

2-23-82 Spotted 200 gal. 7½% Hcl, ran CBL and correlation log, psi casing to 3500 psi, perforated the Dakota Formation from 6690' to 6710' with 11 - 0.4" holes.

2-24-82 Fractured Dakota Formation with 500 gal. 15% Hcl, 42,600 gal. Xlinked gel, 40 tons Co₂ and 71,300# 20/40 sand.

NOTE: Form 9-330 (Well Completion or Recompletion and Log) will be submitted as soon as IP can be obtained pumping. Setting production equipment at present time.

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

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

SIGNED Wayne Townsend TITLE V.P. of Operations DATE March 10, 1982

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

MAR 11 1982

FARMINGTON DISTRICT

BY ECM

NMOCC