

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
JACK A. COLE

3. ADDRESS OF OPERATOR
P.O. Box 191 Farmington, N.M. 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790'FNL, 1820'FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

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

5. LEASE
Contract No. 358

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Indian Bend "A"

9. WELL NO. 1

10. FIELD OR WILDCAT NAME
Ballard Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 5-T-22N-R2W
N.M.P.M.

12. COUNTY OR PARISH
Sandoval

13. STATE
N.M.

14. API NO.
30-043-20635

15. ELEVATIONS (SHOW DF, KDB, AND WD)
G.L. 7436'

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
MAY 15 1982
FARMINGTON, N. M.

(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.)*

SEE ATTACHED FRACTURE TREATMENT

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

FOR: JACK A. COLE
18. I hereby certify that the foregoing is true and correct
ORIGINAL SIGNED BY President, Walsh Engr.
SIGNED Ewell N. Walsh, P.E. TITLE & Prod. Corp. DATE 5/17/82

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

MAY 21 1982

NMOCC

FARMINGTON DISTRICT
BY Smh

Formation Cliffs Stage No. I Date 5/12/82

Operator JACK A. COLE Lease and Well Indian Bend "A" 1

Correlation Log Type Blue Jet From 2990' To 2500'

Temporary Bridge Plug Type N/A Set At _____

Perforations 2952'-2962'
2 Per foot type Bull Jets

pad (FOAM) 6000 gallons. Additives 2% KCL water
& 70% Quality Foam.

FOAM 45,000 gallons. Additives 2% KCL water
& 70% Quality Foam.

Sand 84,000 lbs. Size 10/20

Flush (FOAM) 2,000 gallons. Additives 2% KCL water
& 70% Quality Foam.

Breakdown 1800 psig

Ave. Treating Pressure 1500 psig

Max. Treating Pressure 1800 psig

Ave. Injection Rate 20.0 BPM

Hydraulic Horsepower 265 HHP

Instantaneous SIP 1400 psig

5 Minute SIP 1260 psig

10 Minute SIP _____ psig

15 Minute SIP 1220 psig

Ball Drops: _____ Balls at _____ gallons _____ psig
_____ Balls at _____ gallons _____ psig
_____ Balls at _____ gallons _____ psig

Remarks: Ball off with 30 rubber balls in 1000 gallons acid.

Walsh ENGINEERING & PRODUCTION CORP.

