

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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. NM 38576	
2. NAME OF OPERATOR Gary-Williams Oil Producer, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
3. ADDRESS OF OPERATOR 4 Inverness Court East, Englewood, CO 80112-5599		7. UNIT AGREEMENT NAME N/A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2015' FNL and 695' FEL		8. FARM OR LEASE NAME San Isidro 18	
14. PERMIT NO.		9. WELL NO. DIST. 8	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4400' GR		10. FIELD AND POOL, OR WILDCAT Undesignated Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE NE 18-20N-3W	
		12. COUNTY OR PARISH Sandoval	
		13. STATE NM	

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OIL CON. DIV.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

REPAIRING WELL

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

SHOOTING OR ACIDIZING

ALTERING CASING

(Other) Perforation Squeeze

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.)

- 2/9/84 Tubing pressure 250 psi. Casing pressure 0 psi. Tubing bled off in 5 minutes. Rig up Halco. Mix 240 barrels of water, 2% KCl, 2% Mor-flo and gpt CLA-STA. Filled annulus with 75 barrels. Pressured to 1000 psi. Load tubing at an estimated rate of 4-1/2 barrels per minute at 1100 psi. Mix 75 sx Class B cement, 2% CaCl. Displaced tubing with fresh water. Pressure built to 1700 psi with 45 sx on perforations. Began staging. Squeezed to 2500 psi with 55 sx in perforations (3 stages). Estimate 20 sx (100') in casing. Bled back pressure. Released packer. Reversed with 70 barrels treated water. Perforations: 3155'-3165'
- 2/11/84 Finished drilling cement. Pressure test casing to 2500 psi for 15 minutes. No leakoff.
- 2/12/84 Perforated Menefee from 2932' to 2938', 2 shots per foot, total 13 holes. Strong blow to surface in 5 minutes. Trip in hole with retrievable bridge plug, set at 3050' KB. Rig down Geosource. Casing pressured to 100 psi while rigging down. Bled off in 5 minutes via open 2" valve. Trip in hole with 3-1/2" work string and 7" CS-1 packer. Resumed operations.

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BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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

SIGNED W. P. Marx
W. P. Marx

TITLE Operations Manager

DATE 2/16/84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

FEB 21 1984

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*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

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