

Form 9-331  
(May 1963)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved,  
Budget Bureau No. 42-R1424.

G. LEASE DESIGNATION AND SERIAL NO.

SF-078974

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal 6-22

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Escrito Gallup

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

22-24N-7W NMPM

12. COUNTY OR PARISH 13. STATE

Rio Arriba NM

1. OIL ☒ GAS ☐  
WELL ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

Bco, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 669, Santa Fe, N.M. 87501

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1975' FSL 1837' FWL Sec 22 T24NR7W NMPM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 7053

DF

7066

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 COMPLETION ☐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 perti-  
nent to this work.)\*

Ran cement bond log, gamma ray 5-8-72. Two attached for USGS one attached for OCC.  
Perforated w/2 shots per foot 5732-56 on 5-8-72.

Stage 1 5-11-72

Set retrievematic packer at 5830' & frac via 2 3/8" tubing. Break down formation  
1900 #'s. Spearheaded 250 gals 15% HCL. Treated w/14,500 #'s 10-20 sand & 15,204  
gals Maxi-gel 111 water. Treating pressures: Min 3200; Max 3700; Avg 3650.  
21,210 gals total fluid used. Matrils used: 1 gal aqua flow/1000 gals; 25 #'s/1000  
gals aquaseal; 1% KCL; 3#'s Barium Cl/1000 gals.

Stage 2 5-12-72

Set packer at 5785'. Set retrievematic packer at 5712 & frac via 2 3/8" tubing.  
Hole loaded with 1% KCL water. Break down formation 1200 #'s. Spearheaded 250  
gals 15% HCL. Treated w/13,500 #'s 10-20 sand & 13,272 gals Maxi-gel 111 water.  
Treating pressures: Min 3200; Max 3600; Avg 3400. 18,290 total gals fluid used.  
Matrils used: 1 gal aqua flow/1000 gals; 25#'s aquaseal/1000 gals; 3 #'s/1000  
gals Barium Cl; 1% KCL

Swabbed well. New GOR test taken off third day rate of swabbing on 5-16-72. Amount  
swabbed in eight hours 11 Bbls. of oil, 1 Bbl. water & 30 MCF. Currently  
experiencing trouble getting gel to dissolve. Allowable of 11 Bbls. will be  
adequate until further notice.

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

SIGNED

*Harry R. Boyle*

TITLE

President

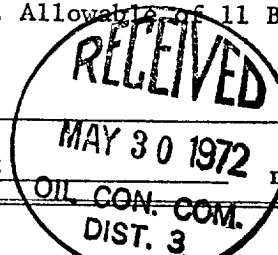
(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE



DATE 5-26-72

\*See Instructions on Reverse Side