

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 ☒ gas ☐ other ☐
well well

2. NAME OF OPERATOR
TRANSOCEAN OIL INC

3. ADDRESS OF OPERATOR 77002
1700 First City East Building, Houston Tx

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 850 FEL & 1740 FSL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE
FEDERAL 28714
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
-
7. UNIT AGREEMENT NAME
N/A
8. FARM OR LEASE NAME
FEDERAL 28714
9. WELL NO.
#2
10. FIELD OR WILDCAT NAME
CHACON-DAKOTA
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 31 T24N R3W
12. COUNTY OR PARISH 13. STATE
Rio Arriba New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
7346 GL

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.)*

Ran 10 JTS, 9 5/8" 36# K-55 ST&C

Set at 421'

CMT w/270 sx Cl "C" + 2% CaCl₂

CMT to surf w/50 sx circulated back to surf.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED Jerry M. Crews

TITLE Sr Drilg Eng Western Division

DATE

October 11 1978

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

U. S. Geological Survey