

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
CONFIDENTIAL
3. ADDRESS OF OPERATOR
1000 Fox Road, Durango, CO 81301
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990' FSL + 1650' 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 | <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | <input type="checkbox"/> |
| (other) <i>spud well, set surface</i> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

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.)*

MIRU, spud 12 1/4" hdz @ 4:00 pm 5-7-79
drld to 256', circ & run csg as follows:
GS, SJ, FC, SJts 9 5/8", 36", styc csg -
total pipe to GL is 239'
amtd w/ 60 ex class "B" cmt, follow w/
150 ex class "B" cmt (did not circ).
1" cmt down backside & brought amt to
surf w/ 70 ex WOC.

5. LEASE
CONTRACT NO. 121
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Sicavilla Apache
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
AYI Apache N
9. WELL NO.
154
10. FIELD OR WILDCAT NAME
plutered cliffs & mesaverde
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 11, T25N, R4W
12. COUNTY OR PARISH 13. STATE
San Juan NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
7297' GS

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

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

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

SIGNED *Wm A. Butterfield* TITLE *Administrative Supervisor* DATE *May 10, 1979*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS Durango 5

BEA
MJE
EXON
GAS. CO. N.M.
FILE

*See Instructions on Reverse Side

