

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 ARCO Oil & Gas Company
Division of Atlantic Richfield Company
3. ADDRESS OF OPERATOR
P. O. Box 5540, Denver, Colorado 80217
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2130' FSL & 2000' FWL (NE SW)
AT TOP PROD. INTERVAL: Unit K
AT TOTAL DEPTH: Approx the same
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) N.O. spud and set surface casing

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 @ 3:30 pm 1-26-80. Ran 9 jts 8-5/8", 24#, K-55, ST&C casing with guide shoe, baffle plate and 3 centralizers (324.20'). Cemented with 300 sxs Class "B" and 2% CaCl₂ with 1/4# flocele/sx. PD @ 12:30 am 1-27-80.

Pressure tested blind and pipe rams to 1000#, held OK.

Drilling ahead @ 1471'.

5. LEASE Jicarilla Contract #111	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla	
7. UNIT AGREEMENT NAME ---	
8. FARM OR LEASE NAME Jicarilla	
9. WELL NO. 106	
10. FIELD OR WILDCAT NAME W. Lindrith - Gallup/Dakota	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 8-24N-4W	
12. COUNTY OR PARISH Rio Arriba	13. STATE New Mexico
14. API NO. 30-039-22036	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 6685' GI	

(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 W. A. Walther, Jr. TITLE Operations Manager DATE 1-29-80

(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

JAN 31 '80

BY D. A. Walther, Jr. DISTRICT Oil

