

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
Cotton Petroleum Corporation

3. ADDRESS OF OPERATOR
717 17th Street, Suite 2200, Denver, CO 80202

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1610' FWL & 1750' FSL, Sec 24
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

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

SUBSEQUENT REPORT OF:

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RECEIVED
MAR 13 1981
U.S. GEOLOGICAL SURVEY
FARMINGTON DISTRICT
(NOTE: Report results of multiple completion of zone change on Form 9-330)

RECEIVED
MAR 13 1981
OIL CON. COM.
DIST. 3

5. LEASE
Contract #129
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache
7. UNIT AGREEMENT NAME
NA
8. FARM OR LEASE NAME
Apache
9. WELL NO.
#28
10. FIELD OR WILDCAT NAME
So. Blanco PC & Chacra
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 24-T24N-R4W
12. COUNTY OR PARISH
Rio Arriba
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
0961' GR

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 4-1/2" 10.5# casing, landed @ 4113', cmt w/100 sxs Class B 65/35 poz, 6% gel, 12-1/4" gilsonite per sx, tailed in w/320 sxs Class B 50/50 poz, 2% gel, PD @ 6:00 PM 1-8-81.

Calculated cement top is 1992', top of the Ojo Alamo is 2500'

ACCEPTED FOR RECORD

MAR 12 1981

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

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

SIGNED [Signature] TITLE Division Prod Mgr DATE March 10, 1981

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NMOCC