

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
Joseph B. Gould

3. ADDRESS OF OPERATOR
2829 E. 2nd Ave. Suite 212 Denver, Co.

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 330' FSL & 330' FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

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* ☐

SUBSEQUENT REPORT OF:

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☐
☐
☐
☐
☐
☐

(other) Production Casing and Cement

5. LEASE

SF 079549

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Phillips

9. WELL NO.

1-32

10. FIELD OR WILDCAT NAME

West Lindrith Gallup/Dakota

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

Sec. 32 T25N, R3W

12. COUNTY OR PARISH

Rio Arriba

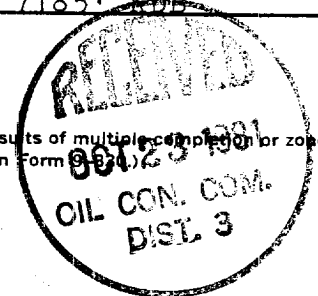
13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

7172 GL, 7185' KDB

(NOTE: Report results of multiple completion or zone change on Form 9-331-C.)



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.)*

9-26-81 to 10-12-81 Drilled 7-7/8" mud hole to 8119'.
Ran IES and FDC-CNL-GR logs.

10-13-81 Ran 201 jts. 4 1/2", 11.6#/ft., K55, STC, 8rd casing
Set at 8119' KDB with float collar at 8078' and
DV Tool at 5741'.

10-14-81 Cemented with 875 sacks in two stages as follows:
1st Stage: 250 sks. 50/50 POZ w/ 2% Gel and 1/4#
per sack cellflake; 150 sks Class "B" w/ 1/4# per sk
cellflake. 2nd Stage 325 sks 65/35 POZ w/ 12% Gel
and 150 sks Class "B" neat. Plug down at 8:30 AM.
Rig Released. WOCT

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

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

SIGNED M. D. Simmons TITLE Agent DATE 10-16-81

(This space for Federal or State office use)

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