

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.)

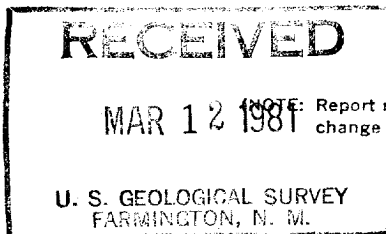
1. oil ☐ well ☐ gas ☒ well ☐ other
2. NAME OF OPERATOR
Amoco Production Company
3. ADDRESS OF OPERATOR
501 Airport Drive, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1080' FNL x 920' FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

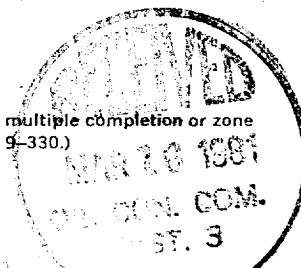
- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Completion

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐
☐



5. LEASE
Jicarilla Contract 155
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Jicarilla Contract 155
9. WELL NO.
28
10. FIELD OR WILDCAT NAME
Gonzales Mesaverde/Otero Chacra
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
NW/4, NW/4, Section 31, T26N, R5W
12. COUNTY OR PARISH Rio Arriba 13. STATE NM
14. API NO.
30-039-22527
15. ELEVATIONS (SHOW DF, KDB, AND WD)
6594' 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.)*

Completion operations commenced on 2-28-81. Total depth of the well is 5395' and plug back depth is 5359'. Perforated intervals from 5237-5248, 5198-5204, 5146-5153, 5112-5116, and 5100-5106 with 2 spf, a total of 68, .38" holes. Fraced Point Lookout with 48,000 gallons of frac fluid and 69,000# of 10-20 sand. Landed the 2 3/8" tubing at 5250. Released the rig on 3-4-81.

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

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

SIGNED Original Signed By
E. E. SVOBODA TITLE Dist. Admin. Supv DATE 3/11/81

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

NMOCC

MAR 13 1981

*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY