

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		JUL 12 1984	
2. NAME OF OPERATOR Consolidated Oil & Gas, Inc.		OIL CON. DIV. DIST. 3	
3. ADDRESS OF OPERATOR P.O. Box 2038, Farmington, New Mexico 87499		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1550' FNL & 1850' FWL		8. FARM OR LEASE NAME LADD	
14. PERMIT NO. API #30-045-25960		9. WELL NO. 1R	
15. ELEVATIONS (Show whether DP, RT, GR, etc.) 6748' KB, 6735' GR		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 19, T25N, R9W	
		12. COUNTY OR PARISH San Juan	
		13. STATE N..M.	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) "Conclude Drlg & Set Csg" <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

- 6-14-84 Drilled 7-7/8" hole to TD (6612') at 8:00 AM. Circ. Ran IES, FDC, CNL, GR, SP logs.
- 6-15-84 Ran 5-1/2" casing as follows: 7 jts 17#, N-80 from 6612' to 6341', 15.5#, J-55 from 6341' to surface. Float collar @ 6569', DV tools at 4680' & 1909'. Pump 20 BE, 10 bbl prewash. Cmt w/ 471 cu ft 50/50 poz, 2% gel, 1/4# flocele/sk. Good circ. Plug down @ 4:00 PM. Drop bomb & open DV tool. Circ 4 hours. Pump 20 BW & 10 bbl prewash. Cmt w/ 720 cu ft 65/35 poz, 6% gel, 6-1/4# gilsonite/sk & 1/4# flocele/sk. Tail in w/ 620 cu ft 50/50 poz, 2% gel, 1/4# flocele/sk. Good circ. Plug down @ 9:00 PM. Drop bomb & open DV tool. Circ out 40 bbl cmt. Circ 4 hours.
- 6-16-84 Pump 20 BW & 10 bbl prewash. Cmt w/ 540 cu ft 65/35 poz, 6% gel 6-1/4# gilsonite/sk, & 1/4# flocele/sk. Circ out 30 bbl cmt. Plug down @ 1:30 AM. Remove BOP, set slips, & cut off 5-1/2" csg. Released rig @ 4:00 AM.
TD 6612'
PBTD 6569'
DV tools 1909' & 4680'

RECEIVED

JUN 29 1984

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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

SIGNED Barbara C. Lex

TITLE Prod. & Drlg. Tech.

DATE 6-25-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE JUL 10 1984

NMOCC

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

BY SMW