

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

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: 1830' FNL x 610' FEL
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) ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

RECEIVED

SEP 10 1983
(NOTE: Report results of multiple completion or zone change on Form 9-330.)

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

5. LEASE
14-20-603-5034
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo Tribe
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Navajo Tribal "U"
9. WELL NO.
19
10. FIELD OR WILDCAT NAME
Tocito Dome Penn "D"
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE/NE, Section 15, T26N, R18W
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
30-045-21386
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5660' 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.)*

Amoco Production Company requests permission to repair the above well according to the attached procedure. Work will commence immediately upon approval.

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

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

SIGNED John L. Wooten District Admin. Supvr. DATE 9-6-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

*See Instructions on Reverse Side

NMOCC

SEP 08 1983
R. Buchanan
AREA MANAGER
Acting

OPERATIONS TO BE PERFORMED: (Circle One)

Recompletion

Repair

Service

LEASE AND WELL Navajo Tribal U No. 19

FIELD Tacito Dome

FORMATION Pennsylvanian "D"

LOGS SP GR-TEL-SWN-SONIC

LOCATION 1830 ENL & 610 FEL, SEC 15, T26N, R18W, San Juan Cty, New Mexico

COMP. DATE 5-14-74 EL: 5659

TD: 6610 PBD: 6565

CSG: 9 5/8" 32.3 # 1496 @ 7 " 23 1/2 # @ 6610

COMP. INT. 6426-6442

ORIG. STIM.

IP 1014 BOPD 1618 MCFD 109 BWPD

CURRENT PROD. INT. SAME

PURPOSE: Inspect pump, perforate & acidize

SDB

DHS

JMS

GOM

RWO

2/FF

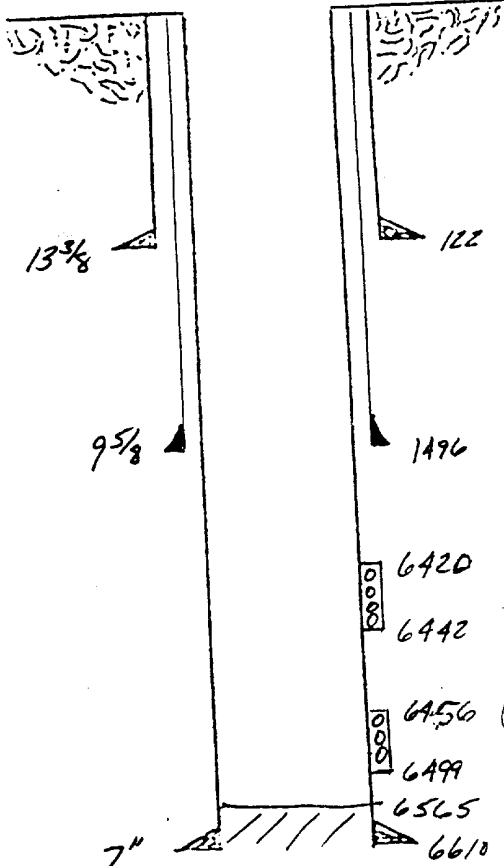
PJS

ENGR.

FILE

WELLBORE SKETCH

PROCEDURE



See Note 2

1. Nipple down wellhead, nipple up 30's, and trip out with rods, pump, and production tubing. Inspect pump for wear and report findings to the main office.
2. Run a gamma ray correlation log from PBD to 6250.
3. Perforate 6450-6499 with 4 jspt and 6420-6426 with 2 jspt.
4. Trip in with tubing, retrievable packer, and retrievable bridge plug. Set bridge plug at 6510.
5. Pull up-hole and displace tubing with 28% retarded HCL.*
6. Set packer at 6449 and squeeze 4200 gal 28% retarded HCL into formation. Over flush with 45 BBLs KCL water.
7. Swab back all acid immediately.
8. Trip in and recover bridge plug. Pull up-hole and set at 6450.
9. Displace tubing with 250 gals. xylene followed by 2250 gals retarded 28% HCL* containing 750 gals. A-SOL. Set packer at 6400 and squeeze into formation. Overflush with 35 BBLs KCL water.
10. Swab back acid immediately.
11. Trip in and recover bridge plug. Trip out with tubing, bridge plug and packer.

DISTRICT SUPERINTENDENT

DISTRICT ENGINEER

DISTRICT FOREMAN

ENGINEER

DATE