

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 ☒ other2. NAME OF OPERATOR
Jerome P. McHugh3. ADDRESS OF OPERATOR
Box 208, Farmington, NM 874014. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
820' FSL - 1850' FEL

AT SURFACE:

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:

☐
☐
☐
☐
☐
☐
☐
☒

5. LEASE

NM 622

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Chaco Plant9. WELL NO.
12J10. FIELD OR WILDCAT NAME
WAW Fruitland PC11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 22 T26N R12W12. COUNTY OR PARISH
San Juan13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6128' GL

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

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.)*

Plugged and abandoned well as follows:

1. Filled 2-7/8" OD, 6.4#, CW-55, 10R, NEUE csg. from 1298.80 to surface using 36 sx cement, displaced with 1/4 bbl. water.
2. Did not install dry hole marker.
3. No reseeding required.
4. Site left in a condition to farm; ripped well pad and access road.
5. Filled all pits.
6. Cleaned well location of all equipment, pipe, junk, and trash.
7. Removed tie-downs.

Subsurface Safety Valve: Manu. and Type

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

SIGNED

Sherman E. Dugan

TITLE

Agent

DATE

12-3-81

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

NMOCC

