

5 MMS, Fmn 1 Navajo Allotted
UNITED STATES 1 McHugh
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

1 File

5. LEASE	N00-C-14-20-7466
6. IF INDIAN, ALLOTTEE OR TRIBE NAME	Navajo Allotted
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME	Quick Deal
9. WELL NO.	
10. FIELD OR WILDCAT NAME	WAW Fruitland P.C.
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	Sec 7 T26N R12W
12. COUNTY OR PARISH	San Juan
13. STATE	NM
14. API NO.	
15. ELEVATIONS (SHOW DF., KDB, AND WD)	5922' GL

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
Jerome P. McHugh

3. ADDRESS OF OPERATOR
P O Box 208, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1850' FNL - 1850' FEL
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:

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-
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-
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-
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-
-

RECEIVED

FEB 24 1984

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

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

XX Status - per BLM Request

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.)*

TD = 1200' GL

6-24-82 PBTD = 1173'. Perforated 1106-08, 1112, 1114-20 (total 11 holes).

7-19-82 Pumped 200 gal. 15% HCL

7-21-82 Pumped 200 gal 15% HCL. Frac with 94,220 sec nitrogen, 5,670# 10-20 sand, 108 gal. Frac Foam I

7-26-82 Landed 35 jts. 1 1/4" O.D., 2.4#, JCW, 10R, EUE tubing at 1136' GL.

7-28 thru Testing.

7-30-82

STATUS: Plan additional testing in the future.

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

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

SIGNED Jim L. Jacobs TITLE Geologist DATE 2-23-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____ TITLE _____ DATE FEB 27 1984
CONDITIONS OF APPROVAL IF ANY:

NMOCC

FARMINGTON RESOURCE AREA
Smm