

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  
R. C. WYNN

3. ADDRESS OF OPERATOR Suite 3545  
First International Bldg. Dallas, Texas 75270

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 2380'FNL, 1380'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:

☐  
☒  
☐  
☐  
☐  
☐  
☐  
☐

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

5. LEASE  
SF-078476

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Federal "R"

9. WELL NO.  
3

10. FIELD OR WILDCAT NAME *Chacra*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15-T27N-R8W  
N.M.P.M.

12. COUNTY OR PARISH San Juan 13. STATE N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5938'G.L.

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.)\*

SEE ATTACHED FOR FRACTURE TREATMENT

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OIL CON. DIV.  
DIST. 3

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

FOR: R. C. WYNN

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

ORIGINAL SIGNED BY EWELL N. WALSH TITLED Walsh Engr. & Prod. Corp. DATE 3/6/84  
SIGNED Ewell N. Walsh, P.E. President  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAR 13 1984

NMOCC

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

BY Smw

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# FRACTURE TREATMENT

Formation Chacra Stage No. 1 Date 2/29/84

Operator R. C. WYNN Lease and Well FEDERAL "R" No. 2

Correlation Log Type GR From P.B.T.D. To 2700'

Temporary Bridge Plug Type None Set At

Perforations 3037'-3060'; 3066'-3069'; 3074'-3077';  
3093'-3096'; 3216'-3220'; 3233'-3236'

2 Per foot type D.P. Tolson

Pad 10,000 gallons. Additives 2% Potassium  
Chloride with Nitrogen Foamer

Water 45,000 gallons. Additives 2% Potassium  
Chloride with 70/30 Quality Foam

Sand 55,000 lbs. Size 20/40

Flush 2,700 gallons. Additives 2% Potassium  
Chloride and foamer

Breakdown 1600 psig

Ave. Treating Pressure 1850 psig

Max. Treating Pressure 3500 psig

Ave. Injection Rate 20 BPM

Hydraulic Horsepower 2000 HHP

Instantaneous SIP 1680 psig

5 Minute SIP 1650 psig

10 Minute SIP 1640 psig

15 Minute SIP 1630 psig

Ball Drops: 36 Balls at 1000 gallons 880 psi  
8 Balls at 4500 gallons None psi  
 Balls at  gallons  psi

Remarks: Job went very good, no increase in 2nd ball drop.

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DIST. 3

Walsh ENGINEERING & PRODUCTION CO.

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