

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

Bixco, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 255, Farmington, NM 87401

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

AT SURFACE: 790' fsl, 1850' fel

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐

(other) Change of program

5. LEASE

NM-33034

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

Gass

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

S8, T27N-R13W, N.M.P.M.

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

30-045-24598

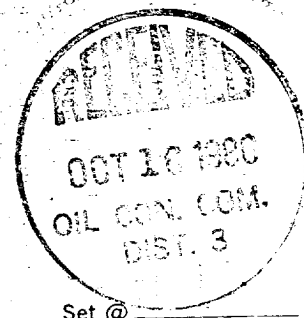
15. ELEVATIONS (SHOW DF, KDB, AND WD)

5956 Gr.

(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.)*

Operator proposes to drill 5 1/4" hole out from under 7" surface casing to total depth, rather than a 4 3/4" hole.



Subsurface Safety Valve: Manu. and Type

Set @ Ft.

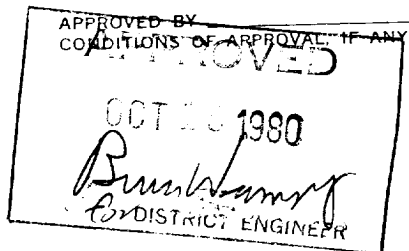
18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE Agent

DATE October 13, 1980

(This space for Federal or State office use)



TITLE

DATE

NMOCC

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT-" for such proposals

5. Lease Designation and Serial No.
NMNM-33034

6. If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA, Agreement Designation
N/A

8. Well Name and No.
Gass #2

9. API Well No.

10. Field and Pool, or Exploratory Area
WAW Fruitland / Pictured Cliffs

11. County or Parish, State
San Juan, NM.

SUBMIT IN TRIPLICATE

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
J.K. Edwards & Associates

3. Address and Telephone No.
1401 17th Street., Suite 1400 Denver, CO 80202 (303) 298-1400

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
790' FSL & 1850' FEL, Sec. 8, T27N, R13W

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other see below

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Re-completed the Gass #2 as per the attached stimulation report. Well is currently shut in for pressure buildup and evaluation.

RECEIVED
MAY 26 1998
OIL CON. DIV.
DIST. 3

COPIED TO FILE
MAY 19 1998

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

Signed John C. Thompson (John C. Thompson) Title Agent Date 05/19/98

(This space for Federal or State office use)

Approved by _____ Title ACCU Date _____
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statement or document.

FARMINGTON DISTRICT OFFICE

NMOCD

Formation Cliffs Stage No. Date 11/20/77

Operator J. K. EDWARDS ASSOCIATES Lease and Well Gass #2

Correlation Log Type GR/CCL From 1415 To 1000

Temporary Bridge Plug Type Set At

Perforations 1313-1326
2 shots Per foot type

Pad 1000 gallons. Additives 20#/1000 gallon
linear gel, surfactant, enzyme breaker, bacteriacide,
"Sand Wedge" in 70% Nitrogen foam.

Water 6,223 gallons. Additives same as above

Sand 35,000 lbs. Size 16/30

Flush gallons. Additives
Included in water total.

Breakdown psig

Ave. Treating Pressure 1150 psig

Max. Treating Pressure 1250 psig

Ave. Injecton Rate 21 BPM

Hydraulic Horsepower HHP

Instantaneous SIP 550 psig

5 Minute SIP 283 psig

10 Minute SIP 302 psig

15 Minute SIP 301 psig

Ball Drops: None Balls at gallons psig
 Balls at gallons psig
 Balls at gallons psig

Remarks:

Walsh ENGINEERING & PRODUCTION CORP.