

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  
AMOCO PRODUCTION COMPANY  
3. ADDRESS OF OPERATOR  
501 Airport Drive Farmington, NM 87401  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
990' FNL x 990' FEL, Section 25,  
AT SURFACE: T-28-N, R-9-W  
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)
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Spud & Set Casing

5. LEASE  
14-20-603-779  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Navajo Allottee  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Eskeenalwood Gas Com "B"  
9. WELL NO.  
1  
10. FIELD OR WILDCAT NAME  
Basin Dakota  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
NE/4 NE/4 Section 25, T-28-N, R-9-W  
12. COUNTY OR PARISH  
San Juan  
13. STATE  
NM  
14. API NO.  
30-045-23306  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5806' 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.)\*

Spudded 13-3/4" hole on 2/1/79. Drilled to 324'. Set 9-5/8", 32.3# casing at 316' with 335 sx Class "B" Neat, 2% CaCl<sub>2</sub>. Circulated cement. Pressure tested casing with 500 psi; held OK.

Drilled 8-3/4" hole to 2350'. Set 7", 20# casing at 2350' and cemented with 375 sx Class "B", 50:50 Poz, 6% gel, 0.5% fluid additive and 10 pounds Gilsonite per sx. Tailed in with 100 sx Class "B" Neat, 2% CaCl<sub>2</sub>. Circulated cement. Drilled 6-1/4" hole to a total depth of 6600'. Set 4-1/2", 11.6# casing at 6600' and cemented first stage with 190 sx Class "B", 50:50 Poz, 6% gel, 2# medium tuf plug per sx 0.8% fluid loss additive. Tailed in with 100 sx Class "B" Neat, 0.8% fluid loss additive. Cemented second stage with 530 sx Class "B", 50:50 Poz, 6% gel, 2 pounds medium tuf plug per sx, 0.8% fluid loss additive. Tailed in with 100 sx Class "B" Neat with 0.8% fluid loss additive. Circulated cement. Drilling rig (continued)  
Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED \_\_\_\_\_ TITLE Dist. Adm. Supvr. DATE 2/26/79

(This space for Federal or State office use)

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

DATE \_\_\_\_\_

\*See Instructions on Reverse Side

nmoc