5-(USGS) Farmington) 1-Pioneer (Smeltzer) 1-File Form Approved. . Budget Bureau No. 42-R1424 Dec. 1973 UNITED STATES 5. LEASE NM 010063 DEPARTMENT OF THE INTERIOR 6. IF INDIAN, ALLOTTEE OR TRIBE NAME GEOLOGICAL SURVEY 7. UNIT AGREEMENT NAME 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.) 8. FARM OR LEASE NAME Lucerne gas \mathbf{x} 9. WELL NO. other well well #1E 2. NAME OF OPERATOR 10. FIELD OR WILDCAT NAME Pioneer Production Corp. Basin Dakota 3. ADDRESS OF OPERATOR 11. SEC., T., R., M., OR BLK. AND SURVEY OR Box 208, Farmington, NM 87401 **AREA** 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 Sec 8 T28N R11W 1100' FSL - 1540' FEL 12. COUNTY OR PARISH 13. STATE AT SURFACE: San Juan 📑 AT TOP PROD. INTERVAL: NM AT TOTAL DEPTH: 14. API NO. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 5555 ' GL SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE (NOTE: Report results of multiple completion or zone REPAIR WELL change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) spud and surface csg 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.)* 5-12-80 Moved in and rigged up Four Corners Drlg Co. Rig #10. Spudded 12-1/4" hole @ 11:30 a.m. 5-12-80. Drilled to 520'. Ran 11 jts 8-5/8" OD 24# K-55 8R ST&C csg. TE 497.44' set @ 509' RKB. Cemented w/300 sx class "B" ptus &% CaCl. Cement did not circulate. Did top job FX/ Las "B" plus 2% CaCl. Job complete @ 7:00 a.m. S. GONDO CAL SUPPLEY FRANKLICH II. M. Subsurface Safety Valve: Manu. and Type 18. I hereby could that the foregoing is true and correct 2 Agent TITLE lhomas (This space for Federal or State office use) TITLE APPROVED BY CONDITIONS OF APPROVAL, IF ANY: EMAY 3-0-4980 *See Instructions on Reverse Side