

(SUBMIT IN TRIPLICATE)

Indian Agency \_\_\_\_\_

Nava jo

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Allettee \_\_\_\_\_

Lease No. 1-89-IND-57

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|  | 33 |  |
|  |    |  |
|  | X  |  |

## SUNDRY NOTICES AND REPORTS ON WELLS

|                                               |                                            |   |
|-----------------------------------------------|--------------------------------------------|---|
| NOTICE OF INTENTION TO DRILL                  | SUBSEQUENT REPORT OF WATER SHUT-OFF        |   |
| NOTICE OF INTENTION TO CHANGE PLANS           | SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING |   |
| NOTICE OF INTENTION TO TEST WATER SHUT-OFF    | SUBSEQUENT REPORT OF ALTERING CASING       |   |
| NOTICE OF INTENTION TO REDRILL OR REPAIR WELL | SUBSEQUENT REPORT OF REDRILLING OR REPAIR  |   |
| NOTICE OF INTENTION TO SHOOT OR ACIDIZE       | SUBSEQUENT REPORT OF ABANDONMENT           |   |
| NOTICE OF INTENTION TO PULL OR ALTER CASING   | SUPPLEMENTARY WELL HISTORY                 |   |
| NOTICE OF INTENTION TO ABANDON WELL           | Well Completion                            | X |

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

March 5, 1964

Well No. 28 is located 660 ft. from  $\begin{matrix} \text{N} \\ \text{S} \end{matrix}$  line and 1980 ft. from  $\begin{matrix} \text{E} \\ \text{W} \end{matrix}$  line of sec. 33

SW/4 Sec. 33

(1/4 Sec. and Sec. No.)

Table Mesa

(Field)

T28N

(Twp.)

R17W

(Range)

NMM

(Meridian)

San Juan County

(County or Subdivision)

New Mexico

(State or Territory)

The elevation of the derrick floor above sea level is 5378 ft.

## DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Please refer to previous Sundry Notices. Set Model "D" packer at 7213'. Perforated Table Mesa zone at 7275'-7277', acidized w/500 gals. MCA. Ran packer leakage test. Found communications through corroded tubing. Fished. Set retrievable bridge plug at 7198'. Cement squeezed Hogback perforations beneath fullbore packer with 40 sacks cement. WOC. Drilled out cement and pulled retrievable bridge plug. Acidized with 500 gals. MCA. Put well on extended test. Perforated 7277'-86' with 4 jets/foot. Continued testing. Installed Camco gas lift pack-off assembly from 5092'-5096' with 3/8" hole in tubing at 5094' and packer at 7212'. Flowed 30 BOPD, 1150 BWPD, and 500 MCFGPD on 15/64" choke 3-3-64. Crude Oil Purchaser - Four Corners Pipe Line Company. Gas Purchaser - U. S. Bureau of Mines.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Continental Oil Company

Address Box 3312

Durango, Colorado

By

J. E. Ellis

Title Assistant District Manager

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 17:** Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

**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 "APPLICATION FOR PERMIT—" for such proposals.)

|                                                                                                                                                             |  |                                                                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>                                            |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>42-111-27                             |
| 2. NAME OF OPERATOR<br>Continental Oil Company                                                                                                              |  | 6. IF INDIAN, ALLOTTED OR TRIBE NAME<br>None                                 |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 3312 - Durango, Colorado                                                                                                |  | 7. UNIT AGREEMENT NAME                                                       |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)<br>At surface<br>660' FSL, 1980' FWL |  | 8. FARM OR LEASE NAME<br>Table Mesa                                          |
| 14. PERMIT NO.                                                                                                                                              |  | 9. WELL NO.<br>28                                                            |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>5366' GR 5378' RB                                                                                         |  | 10. FIELD AND POOL, OR WILDCAT<br>Table Mesa Farm. "C"                       |
|                                                                                                                                                             |  | 11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA<br>Sec. 33, T28N, R17W-NMPL |
|                                                                                                                                                             |  | 12. COUNTY OR PARISH<br>San Juan                                             |
|                                                                                                                                                             |  | 13. STATE<br>New Mexico                                                      |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

|                                              |                                                          |
|----------------------------------------------|----------------------------------------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input checked="" type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>               |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>                        |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>                    |
| (Other) <input type="checkbox"/>             |                                                          |

SUBSEQUENT REPORT OF:

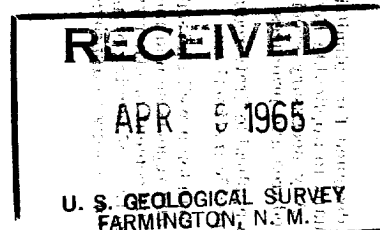
|                                                |                                          |
|------------------------------------------------|------------------------------------------|
| WATER SHUT-OFF <input type="checkbox"/>        | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREATMENT <input type="checkbox"/>    | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/>    |
| (Other) <input type="checkbox"/>               |                                          |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

It is proposed to cut and pull the 4 1/2" casing from Table Mesa No. 28 from approximately 6700' RB. The well is currently completed with 9 5/8" casing set at 5224' RB, with a 7" liner set and cemented from 5094' RB to 7075' RB. The 4 1/2" casing is set from surface to 7325' RB with a cement top determined by temperature survey at 6750' RB.

It is necessary to pull the 4 1/2" casing so that 2 7/8" tubing with gas lift valves can be installed. The well presently will not produce without the proposed gas lift installation. By pulling the 4 1/2" casing and installing gas lift valves in a 2 7/8" tubing string, ultimate gas recovery from the Table Mesa Pennsylvanian "C" reservoir will be increased. By installing the gas lift, the anticipated producing rate will be 1000 BWPD, 15 BOPD, and 130 MCFD.



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

SIGNED W. D. Haley

TITLE District Manager

DATE 4-7-65

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side

USGS(4) INOC(2) HOLLY MDH

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