UNITED STATES

| | SF-078904 | | |
|---|--------------------|----------|-----|
| 6 | LE INDIAN ALLOTTEE | OR TRIBE | NAM |

5. LEASE

| DEPARTMENT OF THE INTERIOR | SF-078904 |
|--|--|
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| | \$4.55 D \$1.3 |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT, NAME |
| SUMPRY MOTICES AND INCLIDITS 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 \$ 2.5 5 |
| | Gallegos Canyon Unit 252 |
| 1. oil gas well other | 9. WELL NO. 9-57 7 407 |
| | 242E |
| 2. NAME OF OPERATOR | |
| Amoco Production Company | 10. FIELD OR WILDCAT NAME |
| 3. ADDRESS OF OPERATOR | Basin Dakota |
| 501 Airport Drive Farmington, NM 87401 | 11. SEC., T., R., M., OR BLK. AND SURVEY OR |
| 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 | AREA PROPERTY PLOY |
| below.) | NE/4, SW/4, Section 24, T28N, R12W |
| AT SURFACE: 1600' FSL x 1455' FWL, Section 24, | 12. COUNTY OR PARISH 13. STATE, |
| AT TOP PROD. INTERVAL: Same T28N, R12W | San Juan NM |
| AT TOTAL DEPTH: Same | 14. API NO. 4047 H 9596 |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, | 30-045-23901 |
| REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WD) |
| | 5851' GL |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | |
| TEST WATER SHUT-OFF | |
| FRACTURE TREAT | |
| SHOOT OR ACIDIZE | |
| REPAIR WELL. | (NOTE: Report results of multiple completion or zone |
| PULL OR ALTER CASING U | change on Form 9-330.) |
| MULTIPLE COMPLETE | 어머니는 이 사람들은 이 휴가를 즐겁는 것이 되었다. |
| CHANGE ZONES ABANDON* | |
| (other) Spud & Set Casing | |
| (omer) opid a occ odding | |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state | e all pertinent details, and give pertinent dates, |
| including estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertinent | irectionally drilled, give subsurface locations and |
| measured and true vertical depths for all markers and zones pertine | to this workly |
| 0 11 1 10 1/44-5 1 0 10 00 1 1-211-1 #- | 2001 - G-+ 0 E/011 - 2/- 0# Tooding of |
| Spudded 12-1/4" hole on 2-18-80 and drilled to | |
| 326' with 315 sx class "B", 2% CaCl ₂ cement. C | |
| 7-7/8" hole to total depth of 6451 . Set $4-1/2$ | ", II.6# casing at 6451 and cemented |
| in two stages as follows: | |
| Stage 1: 340 sx class "B" cement, 65:35 Poz, 65 | % gel, 2# Medium tuf plug 1 sx, 0.8% |
| fluid loss additive. Tailed in with 100 sx class | s "B" Neat, 2% CaCl ₂ cement. |
| Stage 2: 835 sx class "B" cement, 65:35 Poz, 69 | % gel, 2# Medium tuf plug 1 sx, 0.8% |
| fluid loss additive. Tailed in with 100 sx class | ss "B" 2% CaCl; cement. |
| DV tool was set at 4590'. | 그 그는 그는 그를 가지 않는 그들은 물리를 하는 것이다. |
| The rig was released on 3-1-80. | |
| 110 116 110 10100000 01 0 1 0 0 | |
| | కారాల్లో కార్డ్ కార్డ్ క్రామ్ క్రమ్ క్రామ్ క |
| | |
| Subsurface Safety Valve: Manu. and Type | Set @ Ft. |
| | |
| 18. I hereby certify that the foregoing is true and correct | 2.10.00 |
| SIGNED E.E.S. TITLE Dist. Adm. St | upvr. date 3-12-80 |
| | |
| (This space for Federal or State of | ffice use) |
| TITLE | DATE |
| APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY: | 16AD 1 9 1000 |

NMOCC

*See Instructions on Reverse Side



| DEPARTMENT OF THE INTERIOR | 5. LEASE 2 5 5 5 5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
|---|--|
| | SF-078904 (4.5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 |
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| | -3/2 |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME |
| (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.) | Gallegos Canyon Unit |
| 4 | 8. FARM OR LEASE NAME |
| 1. oil gas K other | 2 4 4 8 8 9 9 |
| 2. NAME OF OPERATOR | 9. WELL NO. |
| Amoco Production Company | 242E |
| 3. ADDRESS OF OPERATOR | 10. FIELD OR WILDCAT NAME |
| | Basin Dakota |
| 501 Airport Drive Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA |
| below.) | NE/4, SW/4, Section 24, T28N, R12W |
| AT SURFACE: 1600' FSL x 1455' FWL, Section 24, | 12. COUNTY OR PARISH 13. STATE |
| AT TOP PROD. INTERVAL: Same T28N, R12W | San Juan NM |
| AT TOTAL DEPTH: Same | 14. API NO. 스투스를 및 5 19 년 |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, | |
| REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WD) |
| DEGUECT FOR ADDROVAL TO | 5851 GL |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | 2001 OH 2000 |
| FRACTURE TREAT | |
| SHOOT OR ACIDIZE RECEIV | |
| REPAIR WELL | 10 MOTE: Report results of multiple completion or zone |
| | change on Form 9=330.) -, a g |
| MULTIPLE COMPLETE U. S. GEOLOGICA | AL SURVEY A LEGISLE ME SERVER SE |
| ABANDON* FARMINGTON | AL SURVEY () AND THE SURVEY () |
| (other) Casing Top | |
| | <u> </u> |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical deaths for all markers and zero and true vertical deaths for all markers and zero. | |
| measured and true vertical depths for all markers and zones pertinent | t to this work.)* |
| | +3.8888 - 9.0543 |
| The top of the cement behind the $4-1/2$ " casing is | s the surface. |
| | Are |
| | TOH! HIE |
| | / ALULIVED \ |

ACCEPTED FOR RECORD

APR 17 1980

Subsurface Safety Valve: Manu. and Type _____ 18. I hereby certify that the foregoing is true and correct Origino SIGNED ___ TITLE Dist. Adm. Supvr. DATE E. E. SVC: CUA (This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side