

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

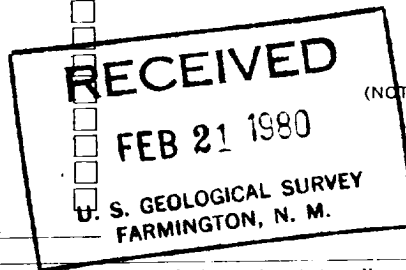
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☐ well gas ☒ well other ☐
2. NAME OF OPERATOR
AMOCO PRODUCTION COMPANY
3. ADDRESS OF OPERATOR
501 Airport Drive, Farmington, N.M. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 940' FNL, 1000' FEL, Section 15,
AT TOP PROD. INTERVAL: Same T29N, R9W
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) Six month extension ☐

SUBSEQUENT REPORT OF:



5. LEASE
SF-078132
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
A. L. Elliott "C"
9. WELL NO.
4
10. FIELD OR WILDCAT NAME
Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
NE/4, NE/4, Section 15, T-29-N, R-9-W
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
30-045-23346
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5950' 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.)*

This is to request an extension of approval for drilling, as the approval expired on January 20, 1980. On February 8, 1980, a 12-1/4" hole was spudded and drilled to a depth of 293'. Set 9-5/8", 32.3# surface casing at 293' on 2/8/80 and cemented with 300 sx Class B neat cement containing 2% CaCl₂. Currently drilling to TD. This extension was discussed with Mr. Simms on 2/19/80.

Subsurface Safety Valve: Manu. and Type _____

Set @

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

SIGNED B. E. Jackwell TITLE District Engineer DATE February 20, 1980

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

AMOCO

*See Instructions on Reverse Side

RECEIVED

FEB 25 1980
OIL CON. COM.
DIST. 3
JAMES F. SIMS
DISTRICT OIL & GAS SUPERVISOR