

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
W. M. Gallaway
3. ADDRESS OF OPERATOR 101-2 Petroleum Plaza Bldg.,
Farmington, New Mexico 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FSL and 790' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
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) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☒
☐
☐
☐
☐
☐

5. LEASE S.F. 047020 B
~~ST 044020 (b)~~
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
U. S.
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
DeLo
9. WELL NO.
11
10. FIELD OR WILDCAT NAME
Fulcher Kutz P.C.
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 26, T29N, R11W
12. COUNTY OR PARISH San Juan 13. STATE N. M.
14. API NO.
30-045-22639-00
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5616' GR

(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.)*

Propose to squeeze off old perforations from 1786' - 96' with 75 sacks of cement and continue 100' up inside of the 4½" casing to 1686', tag cement, pressure test to 1000# for 20 minutes. Perforate well in Farmington sand from 940' - 945', stimulate with acid and test.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED W. M. Gallaway TITLE Operator DATE June 16, 1981.

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

APPROVED

NMOCG

*See Instructions on Reverse Side

JUN 23 1981
E. A. Schmidt
for JAMES F. SIMS
DISTRICT OIL & GAS SUPERVISOR

