

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT - " for such proposals

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Designation and Serial No. <b>SF-078926</b>
2. Name of Operator <b>Amoco Production Company</b>		6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <b>P.O. Box 800, Denver, CO 80201 (303) 830-4988</b>		7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>1000' FSL 1720' FEL Sec. 35 T 29N R 13W Unit O</b>		8. Well Name and No. <b>Gallegos Canyon Unit 287</b>
		9. API Well No. <b>3004523606</b>
		10. Field and Pool, or Exploratory Area <b>W. Kutz Pictured Cliffs</b>
		11. County or Parish, State <b>San Juan New Mexico</b>

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Refrac</u>	<input type="checkbox"/> Dispose Water

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

13. 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.)\*

Amoco Production Company requests permission to perform a workover on this well per the attached procedure.

RECEIVED  
JUL 09 1996  
OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM  
96 JUL -3 AM 9:29  
070 FARMINGTON, NM

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

Signed

*Patty Haefele*

Title

Staff Assistant

**APPROVED**

01-1996

(This space for Federal or State office use)

Approved by

Title

Conditions of approval, if any:

JUL 08 1996

**DISTRICT MANAGER**

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.



## SJOET Well Work Procedure

**Wellname:** GCU #287  
**Version:** #1  
**Date:** May 29, 1996  
**Budget:** Repair  
**Workover Type:** Refrac

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### Objectives:

1. Perforate and fracture previously unstimulated upper PC
  2. Clean out lower PC
  3. Return well to production
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### Pertinent Information:

Location:	1000' FSL, 1720' FEL, O S.35 29-13	Horizon:	W.Kutz PC
County:	San Juan	API #:	30-045-23606
State:	New Mexico	Engr:	Irina Mitselmakher
Lease:	SF-078926	Phone:	W--(303)830-4371
Well Flac:			H--(303)369-9301

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### Economic Information:

APC WI:	PC Prod. Before Repair:	0 MCFD
Estimated Cost:	PC Anticipated Prod.:	200 MCFD
Payout:		
Max Cost -12 Mo. P.O.		
PV15:		
Max Cost PV15:		

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### Formation Tops: (Estimated formation tops)

Nacimiento:	Menefee:
Ojo Alamo:	Point Lookout:
Kirtland Shale:	Mancos Shale:
Fruitland:	Gallup:
Pictured Cliffs:	Greenhorn:
Lewis Shale:	Graneros:
Chacra:	Dakota:
Cliffhouse:	Morrison:

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### Bradenhead Test Information:

**Test Date:** 9/19/88    **Tubing:**    **Casing:**    **BH:** 0 psi.

Time	BH	CSG	INT	CSG
5 min				
10 min				
15 min				

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**GCU #287**  
**Sec. 35 T 29 R 13**  
**Completed 11/79**  
**PBTD=1783'**

1. MIRUSU. Bleed pressure off well if necessary. NDWH. NU and test BOP's.
2. Tag bottom with tubing. TOH w/ 2 3/8" tubing, inspect tubing joints while pulling. Verify PBTD of 1783'.
3. Run GR/CCL from 1783' to 783'. Correlate with original gamma ray log.
4. RIH and set a RBP at 1616' to isolate bottom perms.
5. PT casing to 2000 #. (Casing grade is BE-5L which is a line pipe grade. Get a wellhead ID from FMC to ensure that wellhead can withstand frac pressure.)
6. Perforate the upper PC zone with 2 jspf in the following interval (24 shots):  
  

**1594' - 1606'**
7. Fracture the upper PC zone according to the attached procedure. Treating pressure is not to exceed 1978 psi which is the max working pressure for this grade of pipe.
8. Flow back immediately on a 1/4" choke for 4-8 hrs, change to 1/2" choke, flow back until pressure subsides.
9. Clean out to RBP. Retrieve BP.
10. Clean out to PBTD = 1783'.
11. RIH with and land seating nipple and 2 3/8" tbg at approx. 1610'.
12. ND BOP's. NU and test wellhead. RIDMOSU.

**If problems are encountered, please contact:**

**Irina Mitselmakher**  
**W: (303)830-4371**  
**H: (303)369-9301**