## UNITED STATES

	Form Appro Budget Bure	ved. eau No. 42-R1424
5. LEASE		. 1 4
0 F 0	79100	
6. IF INDIA	73109 N, ALLOTTEE OR T	RIBE NAME
	REEMENT NAME	
Gallagos 8. FARM O	Canyon Unit R LEASE NAME	Com G
9. WELL N		
	179E	
	n Dakota	
11. SEC., T.	, R., M., OR BLK.	AND SURVEY OR
AREA	NW/4 SE/4, S	ection 26
	T29N', R12':1 Y OR PARISH 13.	STATE
San\Ju	an = 1	lew Mexico
14. API NO.	)-04 <b>5</b> -24556	
	IONS (SHOW DF,	KDB, AND WD)
	406' GL	, , , , , , , , , , , , , , , , , , ,
1		
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1981		1 611
(NOTELIE )	ort esults of multiple	completion of zone
CAL AL M. cha	ge on Form 9-330	FED
SON M.		011 ,05 2
		CON 190
and the second		O'S' CO
	- 1	completion de zone O// CON O/S CON  pertinent dates ace location and
e all pertinen	t details, and give	pertinent dates,
lirectionally dr nt to this work	illed, give subsurfa .)*	ace locations and
du = 1		10 61721
	of the well	
IS thom bi	910-5926', 5°	300-002 <u>1.</u> "
	raced with 30	
	ed 2 3/8 incl	n Tubing
g on $2-20$	-51. <sub>1.2</sub> [	
	en la Billion	
	* *	
		4.24
	Set @ _	Ft.

DEPARTMENT OF THE INTERIOR	J. ELASE
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
GEOLOGICAL SURVEY	
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
not use this form for proposals to drill or to deepen or plug back to a difference or use form 9–331–C for such proposals.)	ent Galleges Canyon Unit Com G
ervoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
oil gas other	9. WELL NO.
Well - Well Strist	179E
NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
AVOCO PRODUCTION COMPANY ADDRESS OF OPERATOR	Basin Dakota
	11. SEC., T., R., M., OR BLK. AND SURVEY OR
501 Airport Drive, Farmington, NM LOCATION OF WELL (REPORT LOCATION CLEARLY. See space	
below.) 1615' FSL × 1740' FFL	T29N, R124
AT SURFACE:	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Same	San Juan New Mexico
AT TOTAL DELTIT.	14. API NO.
CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA	DE, 30-045-24556 15 ELEVATIONS (SHOW DF, KDB, AND WD)
REPORT, OR OTHER DATA	E 406 LOUTE
EQUEST FOR APPROVAL TO:  EST WATER SHUT-OFF  RACTURE TREAT HOOT OR ACIDIZE  EPAIR WELL  ULL OR ALTER CASING  HOUSE COMPLETE	5406' GI
EST WATER SHUT-OFF	
RACTURE TREAT	2 1981
HOOT OR ACIDIZE U	(NOTEN Report assults of multiple completion of 2009
ULL OR ALTER CASING	SUN charge on Form 9-330
IULTIPLE COMPLETE	110GON A CO
HANGE ZONES U U CE BANDON* U U SEARN	MANUEL SOL
other) Completion	(NOTE (Report esults of multiple completion & zons )
7. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly 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 pert	tinent to this work.)*
tities semmenced on 2 14 81	Total coath of the well is 6132!
completion operations commenced on 2-14-81. Ind plugback depth is 6090. Perforated inter	rvals from 5910-5926' 5988-6021'
nd 6028-6034' with 2 spf, a total of 110, .4	Wholes. Fraced with 36.250
allons of foam and gel and 42,812 $\#$ of 20-40	sand. Landed 2 3/8 inch tubing
t 6047'. Swabbed the well and released the	rig on 2-20-81.
·	
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
8. I hereby certify that the foregoing is true and correct	
Citation Co.	0/04/01
SIGNED E. E. SVOBODA	
(This space for Federal or Sta	ate office use)
ACCEPTED FUR RECURU	DATE
CONDITIONS OF APPROVAL. 15 ANY:	
MARAAA	
NMOCG	

FARMINGTON DISTRICT

\*See Instructions on Reverse Side