PULL OR ALTER CASING

Completion Operations

MULTIPLE COMPLETE CHANGE ZONES ABANDON\*

## Form Approved. Budget Bureau No. 42-R1424 UNITED STATES 5. LEASE DEPARTMENT OF THE INTERIOR. NM-020502 6. IF INDIAN, ALLOTTEE OR TRIBE NAME GEOLOGICAL SURVEY 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to defiferent reservoir. Use Form 9-331-C for such proposals.) 8. FARM OR LEASE NAME Abrams (as Com "E" gas well $\square$ $\boxtimes$ other well عُون 9. WELL NO. 2. NAME OF OPERATOR Amoco Production Company 10. FIELD OR WILLDOAT NAME 3. ADDRESS OF OPERATOR Basin Dakora 501 Airport Drive, Farmington, NM 87401 11. SEC., T., R., M. OR BLK. AND SURVEY OR SW/4, SW/4, Section 30, 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 T29N, RIOW below.) AT SURFACE: 790' FSL x 790' FWL 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: San Juan Same AT TOTAL DEPTH: 14. API NO. <u>Same</u> 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, <u>30-045-24733</u> REPORT, OR OTHER DATA 15. ELEVATIONS (SHOW DF, KDB, AND WD) 56021 GL SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report results of multiple completion or zone

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If we'll is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

change on Form 9-330.)

Completion operations commenced on 11-20-81. Total depth of the well is 6475' and the plug back depth is 6435'. Perforated intervals from 6206-6214', 6266-6276', 6276-6296', and 6296-6316' with 2 SPF, a total of 116..38" hales. Fraced the formation with 88,000 gallons of frac fluid and 258,000 pounts of 20-40 sand. Lanced 2-3/8" tubing at 6291'. Released the rig on 11-24-8.

Subsurface Safety Valve: Manu. and Type		88T @	Ft.
18. I hereby certify that the forego	oing is true and correct		
SIGNED	TITLE Dist. Adm. Supyr. DATE	DEG 2.3 1981	
	(This space for Federal or State office use)		
APPROVED BY	TITLE DATE		