

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  
Mitchell Energy Corporation
3. ADDRESS OF OPERATOR 80202  
1719 Colorado National Bldg. - Denver, CO
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1550' FSL & 1590' FEL  
AT TOP PROD. INTERVAL: same  
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) ☐

## SUBSEQUENT REPORT OF:

- ☐
- ☐
- ☐
- ☒
- ☐
- ☐
- ☐
- ☐

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

DEC 13 1978

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.)\*

Located casing leak in 7-5/8" casing @ 3224'. With BP @ 3950', squeezed with 110 sx Class "B" cement containing 0.6% fluid loss additive - did not hold after drill out. Broke down squeeze w/110 gal 15% HCL & resqueezed w/100 sx Class "A" cement. Drilled out cement, pressure tested to 1500#. Ran tbg to 8251'. Swabbed for clean up & shut in pending installation of sales line.

NOTE: 5-1/2" liner tested ok from liner hanger @ 3970' to 8045' (Dakota perms 8164'-8267')

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED J. D. Keisling TITLE District Prod. Manager DATE 12/08/78

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

