

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

1. NAME OF WELL (If well is named, give name; if not, give location of well.)

2. LOCATION OF WELL (If well is named, give name; if not, give location of well.)

3. NAME OF OPERATOR (If well is named, give name; if not, give location of well.)

4. ADDRESS OF OPERATOR

5. LOCATION OF WELL (If well is named, give name; if not, give location of well.)

6. AT SURFACE

7. AT TOP PROD. INTERVAL

8. AT TOTAL DEPTH

9. LOCATION OF WELL (If well is named, give name; if not, give location of well.)

10. 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) SUB. RPT. OF ADDN'L COMPL. OF UPPER GALLUP & STIMULATION OF PRESENT LOWER GALLUP

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.)*

MC & RV Turnington Well Service 8-2-82. Squeezed Lower Gallup Perfs (1026'-1262') with 1 bbl S-271 and 20 gals D-600 in 40 bbls water. Displaced with 130 bbls water. Ran casing scraper. Set 50' 11-11' Perfs'd 1185'-1142' with 2 SPI. Spotted 500 gals T-111 HCL. Frac'd with 7,000 gals fluid and 20,830 # sand. Tap sand 1170'. Col. logged. Pulled BI. Ran tubing. RD & MC unit 8-5-82.

RECEIVED

AUG 30 1982

OIL CON. DIV.
DIST. 3

Subsurface Safety Valve: Mand. and Type

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

SIGNED

TITLE District Prod. Superintendent

DATE 12-11-82

(This space for Federal or State office use)

APPROVED FOR RECORD
CONDITIONS OF APPROVAL IF ANY

TITLE DATE

12-11-82