

SUNDRY NOTICES AND REPORTS ON WELLS

1. oil well ☐ gas well ☒ other

Jack A. Cole

P. O. Box 191 Farmington, New Mexico 87499

AT SURFACE: 1850' FSL, 790' FEL

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other)	

SUBSEQUENT REPORT OF

X

REC-1983

U. S. DEPARTMENT OF AGRICULTURE
FARMINGTON, N. M.

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

AUG 22 1983

OIL COMPANY, V.
DIST. 3

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.)*

8-6-83 Spud well 1:00 p.m.

8-6-83 TD 134'. Ran 3 jts., 8-5/8", 24.0 lb., K-55 casing (124.38' set at 124.38'), cemented with 95 sacks class 'B' with 3% calcium chloride and 1/4 lb. Flocele per sack. Cement circulated to surface.

8-7-83 Pressure test with 500 psig. Test okay.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

For: Jack A. Cole

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

SIGNED Dwight Blumatt TITLE Production Supt. DATE _____

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY: _____

DATE 12/20/2011

AUG 19 1983

*See Instructions on Reverse Side

NMOCC

LA BUREAU RESOURCE AREA
SANTA FE, NEW MEXICO
SMH