

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

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
Amoco Production Company

3. ADDRESS OF OPERATOR
501 Airport Drive Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1690' FSL x 1660' FEL Section 32,
AT TOP PROD. INTERVAL: Same T26N, R5W
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| REQUEST FOR APPROVAL TO: | SUBSEQUENT REPORT OF: |
|-----------------------------------------------|--------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* <input type="checkbox"/> | <input type="checkbox"/> |
| (other) <u>Completion Procedure</u> | |

5. LEASE
Jicarilla Contract 155

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jicarilla Contract 155

9. WELL NO.
12E

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
NW/4 SE/4 Section 32, T26N, R5W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

14. API NO.
30-039-22090

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6514' GL

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

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.)*

Completion operations commenced on 8/23/79. Circulated hole clean with 2% KCL water. Perforated from 7273' to 7346' with 2 SPF, total of 104 holes. Squeezed with 50 sx class "B" Neat cement. Pressure tested to 4200#, held okay. Perforated from 7106' to 7208' with 2 SPF, total of 80 holes. Sandwater fraced with 120,000 gallons of frac fluid and 240,000# of sand. Swabbed well and released rig on 8/27/79.

Completion operations again commenced on 10/16/79. Sandwater fraced well with 114,030 gallons frac fluid and 204,180# of sand.

Flowed well to pit and released rig on 10/19/79.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED LE. SPOONER TITLE Dist. Adm. Supr. DATE 11/12/79

(This space for Federal or State office use)

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

