

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SF-077386-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

E. J. Johnson "C"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

NW/SW Sec. 21, T27N, R10W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

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 "APPLICATION FOR PERMIT—" for such proposals.)

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Amoco Production Co.

3. ADDRESS OF OPERATOR

501 Airport Drive, Farmington, N.M. 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

940' FWL x 1600' FSL

RECEIVED

AUG 14 1985

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6233' GL

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

REILL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROMISED 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 perti-
nent to this work.)*

Amoco Production Company requests approval to repair the above
referenced well according to the attached procedure.

RECEIVED

AUG 16 1985

OIL CON. DIV.
DIST. 3

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

SIGNED

B. S. Shaw

TITLE Adm. Supervisor

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE 8-9-85

DATE
AUG 15 1985

AREA MANAGER
SAS/AMT/IN RESOURCE ARE

*See Instructions on Reverse Side

NMOCC

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the
United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

FARMINGTON DISTRICT WORKOVER

DATE: 7/17/85

OPERATIONS TO BE PERFORMED: (CIRCLE ONE)

RECOMPLETION

REPAIR

SERVICE

LEASE AND WELL E.J. Johnson C No. 1FIELD Basin DakotaFORMATION DakotaLOGS Induction Log, Sonic LogLOCATION SW/4, Sec 21, T27N, R10WSan Juan County, New MexicoCOMP. DATE 7/64EL: 6247' KBTD: 6652'PBD: 6556'CSG: 4-1/2" 10.5 # J-55 6652': 8-5/8" 24.0 # J-55 364'COMP. INT. 6454-6602'ORIG. STIM. 87000 gals x 64000"IP 2377 MCFDCURRENT PROD. INT. 6494-6454PURPOSE: Repair Casing LeaksDRB
B.W.

8 PERMITTING DESK

MCH
RGH
BVD
GMKGOM
TWE

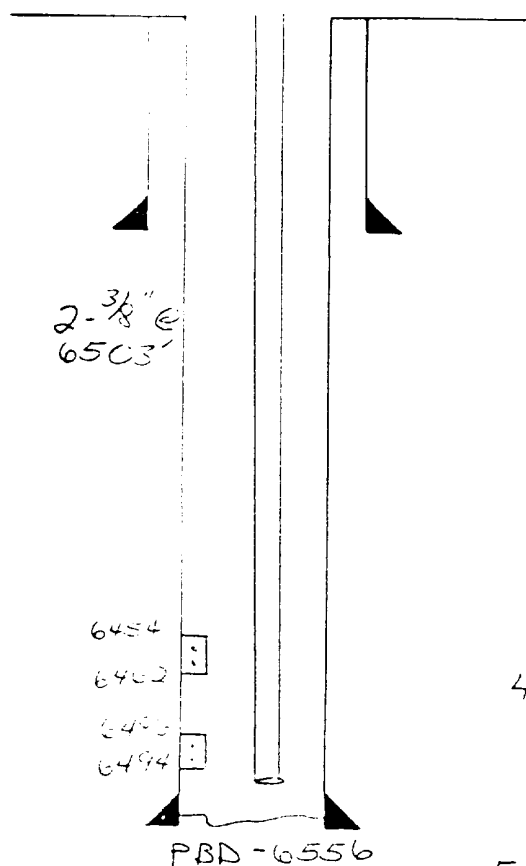
ENGR

JT

Note: Work well hot.
Formation is water
sensitive.

WELLBORE SKETCH

PROCEDURE



1. MIRUSU.

2. PU 2-3/8" tbg and tag fill. TOH with 2-3/8" tbg.

3. TIH with BP, packer, and 2-3/8" tbg. Set BP at 6400'. Load hole with 2% KCl water. Set packer at 6350'. Pressure test BP and tubing to 1000 psi. Pressure test backside to 1000 psi. If casing will not hold pressure, locate hole with packer. Squeeze hole with 50 sx Class B Neat.

4. Drill out cement and pressure test to 1000 psi. Unload hole with N₂. Retrieve BP at 6400'.

5. TIH with 2-3/8" tbg, seating nipple, and sawtooth collar. Land tbg at 6503'.

DISTRICT MANAGER W. H. HolcombDISTRICT ENGINEER W. Blevins 072285

DISTRICT FOREMAN _____

ENGINEER Morris Bell ext 244 (598-9751)DATE 7/22/85

ENGSPÉ

ENG40