

**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 Wildcat

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: 1530' FSL x 980' FWL, Section 9,
AT TOP PROD. INTERVAL: Same T29N, R9W
AT TOTAL DEPTH: Same

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

5. LEASE
SF-076337

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
W. D. Heath "A"

9. WELL NO.
14

10. FIELD OR WILDCAT NAME
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
NW/4 SW/4, Section 9, T29N, R9W

12. COUNTY OR PARISH
San Juan

13. STATE
NM

14. API NO.
30-045-23902

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5732' GR

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON*

(other) Spud & Set Casing

(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.)*

Spudded a 15" hole on 1-16-80 and drilled to 284'. Set 13-3/8", 54.5# surface casing at 282' on 1-18-80 and cemented with 440 sx class "B" Neat cement containing 2% CaCl₂. Drilled a 12-1/4" hole to TD of 2242'. Set 8-5/8", 24.0# production casing at 2215' on 1-26-80 and cemented with 1200' sx class "B" Neat cement containing 50:50 Poz, 6% gel, 2# Medium tuf plug per sx, and 2% CaCl₂. Tailed in with 100 sx class "B" Neat cement.
No DV tool was set on the above cementing program.
Released the rig on 1-29-80.

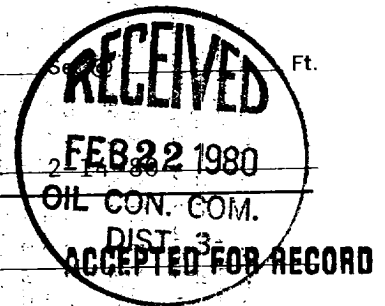
Subsurface Safety Valve: Manu. and Type _____ Ft.

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

SIGNED E. E. SVOBODA Original Signed By TITLE Dist. Adm. Supvr. DATE _____

(This space for Federal or State office use)

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



MOCCHI

FEB 21 1980