

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.)

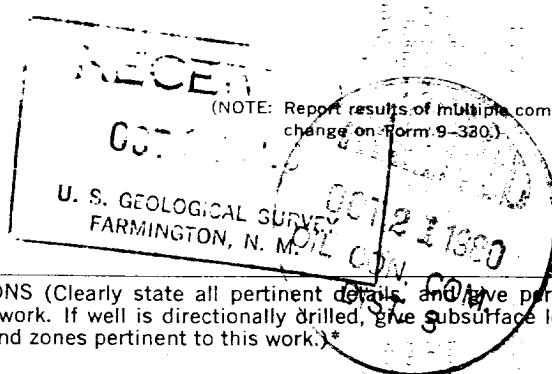
1. oil well ☐ gas well ☒ other ☐
2. NAME OF OPERATOR  
**Consolidated Oil & Gas Inc.**
3. ADDRESS OF OPERATOR  
**P. O. Box 2038 Farmington, New Mexico 87401**
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
**990' FNL & 1850' FWL**  
AT SURFACE:  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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) **Completion**

SUBSEQUENT REPORT OF:

- ☐  
☐  
☐  
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(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.)

**1st Stage Lower MV**

9-27-80 Perf: 4583-85-4612-18-21-25-34-37-40-43-46-63-66-96.

9-28-80 Acidized w/500 gal 7 1/2% HCL acid. Frac'd w/64,700 gal 70 quality foam & 3500 # 20-40 sand & 30,000# 10-20 sand. Max pr 2300# Avg. pr 1600# avg rate 20 BBL

**2nd Stage Upper MV**

9-30-80 Perf: 4438-42-46-50-54-66-72-78-82-86-92-96-4504-08-14-19-26-32.  
Acidized w/500 gal 7 1/2% HCL acid. Frac'd w/ 76,950 gal 70 quality foam & 34,800 lb 10-20 sand & 42,500 lb. 20-40 sand. Max pr 2400# avg pr 2100# avg rate 30 BBL

Subsurface Safety Valve, Mand. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED John Richardson TITLE **Drilling Supt.** DATE **10-8-80**

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

OCT 20 1980

\*See Instructions on Reverse Side

BY BW

W. C. C. C.