Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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 3038, FARMINGTON, N. MEX. 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See also space 17 below.)
AT SURFACE: 1120' FSL & 1120' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
SF 078464
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
PAXTE
9. WELL NO.
1-E
10. FIELD OR WILDCAT NAME
BASIN DAKOTA
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 35 T 31N R13W
12. COUNTY OR PARISH: San Juan
13. STATE: New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5975' GL

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

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)		

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

RECEIVED
JAN 19 1981
OIL CON. COM.

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.)*

12-16-80 Perf lower Dakota 6819, 23, 26, 30, 34, 70, 73, 76, 79, 83.(10 perf).32"

12-17-80 Pump 500 gal 7 1/2% hcl acid. Frac w/43,000 gal 40# X-link gel 8,000# 100 mesh sn & 35,000# 20-40 sn. Max pr 6050 psi. Avg pr 5000 psi Avg inj rate 15 bpm

12-20-80 Perf upper Dakota 6664, 70, 76, 81, 92, 96, 6709, 12, 20, 24, 27, 37, 42, 46, 50, 53, 56. (17 shots) .32" dia.
Acidized w/1000 gal 7 1/2% hcl.
Frac w/80,000 gal 40# X-link gel, 40,000# 20-40 sn, 60,000# 10-20 sn, Max tr pr 2900 psi, avg tr pr 2700, Avg inj rate 24 bpm.

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

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

SIGNED [signature] TITLE DRILLING SUPT. DATE 1-13-81

(This space for Federal or State office use)

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

NMOCC

JAN 27 1981

BW

*See Instructions on Reverse Side