

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

Koch Exploration Co (Div of Koch Ind., Inc.)

3. ADDRESS OF OPERATOR

P.O. Box 2256; Wichita, Kansas 67201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1500' FEL & 790' FSL

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) Run production casing

SUBSEQUENT REPORT OF:

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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.)*

Drilled 6-1/4" hole to 3555'. Ran 106 jts 4-1/2" 10.5# K-55 ST&C casing. Set casing @ 3533'. Cmt'd in two stages w/150 sx class "B" & 1/4# flocele, DV @ 3307', second stage 511 sx lite and 50 sx class "B" w/1/4# flocele. PD @ 1:15 AM 10-16-80 w/2500#. Ran temp survey, found top cement behind 4-1/2" casing @ 250' from surface.

5. LEASE

NM - 013688A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

N/A

8. FARM OR LEASE NAME

Walker

9. WELL NO.

6-R

10. FIELD OR WILDCAT NAME

Blanco-PC

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

Sec. 13-31N-10W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

14. API NO.

N/A

15. ELEVATIONS (SHOW DE, KDB, AND WD)
GR 6590'

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

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

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

SIGNED

David L. Schmitt

TITLE Operations Mgr

DATE 10-20-80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

114000

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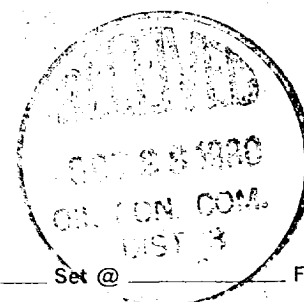
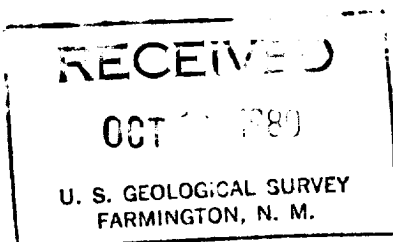
1. oil ☐ well gas ☒ well other ☐
2. NAME OF OPERATOR
Koch Exploration Co (Div of Koch Ind., Inc.)
3. ADDRESS OF OPERATOR
P.O. Box 2256; Wichita, Kansas 67201
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1500' FEL & 790' FSL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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>Run Surface Casing</u>			

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 8-3/4" hole @ 6:30 P.M. 10-9-80. Drld 8-3/4" hole to 232'. Ran 5 jts 7" K-55 26# LT&C casing. Set casing @ 224'. Cmtd w/150 sx neet cmt w/1/4# flocele & 2% CaCl. Cmt Circ.



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

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

SIGNED David L. Schmidt TITLE Operations Manager DATE 10-14-80

(This space for Federal or State office use)

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

NMOCC

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 G-331-C for such proposals.)

1. Oil ☐ Gas ☐
Well ☐ Well ☐ other ☐

2. NAME OF OPERATOR

Koch Exploration (Div. of Koch Industries)

3. ADDRESS OF OPERATOR

P.O. Box 2256 Wichita, Kansas 67201

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17)

Below 355 PSL And 1060 PSL

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

15. 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) ☐

SUBSEQUENT REPORT OF:

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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.)

Well was ruined during an attempt to recompleate. Presently well has 4 1/2" casing set at 3548FT. Well is perforated 3416-3454FT. with 2 1/2" tubing set at 3382FT. and cemented to surface with 250 sx. neat cement. Circulated 10 sx. cement. The 2 1/2" tubing has a tubing swab and 1000 FT. of sand line hung in sand at 2500 FT. We were unable to fish it out of hole. We cannot into tubing. We plan to perforate 2 1/2" tubing at 2500 FT. then fill tubing with cement by displacing to perforations with cement. Will cut off casing and install marker.

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

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

SIGNED Robert B. Beland District Supt. DATE Oct. 6, 1980

(This space for Federal or State office use)

APPROVED BY:

CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE

James J. Lewis
SPECIAL AGENT IN CHARGE

DIRECTOR, GEOLOGICAL SURVEY

NM4000

*See Instructions on Reverse Side

5. LEASE
6. IF INDIAN ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD OR WILDCAT NAME

Blanco Pictured Cliffs

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

AREA
I3-31N 10W

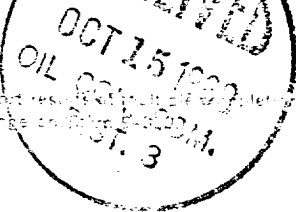
12. COUNTY OR PARISH 13. STATE

San Juan New Mexico

14. API NO.

15. ELEVATIONS (SEEIN DB, AND WD)

6594CR-5605



(NOTE: Report results of all operations or zone changes on Form G-331-C)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR Koch Exploration Company (Division of Koch Industries, Inc.)						5. LEASE DESIGNATION AND SERIAL NO. NM-013688A	
3. ADDRESS OF OPERATOR P.O. Box 2256; Wichita, Kansas 67201						6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1500' FEL & 790' FSL (SW SE) At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME N/A	
14. PERMIT NO. N/A						13. STATE NM	
15. DATE SPUDDED 10-9-80						12. COUNTY OR PARISH San Juan	
16. DATE T.D. REACHED 10-15-80						13. STATE NM	
17. DATE COMPL. (Ready to prod.) 11-13-80						19. ELEV. CASINGHEAD N/A	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* GR 6590' KB 6602						20. TOTAL DEPTH, MD & TVD 3555	
21. PLUG, BACK T.D., MD & TVD 3500						22. IF MULTIPLE COMPL., HOW MANY* →	
23. INTERVALS DRILLED BY → Rotary						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3404-3442 Pictured Cliff (Selective)	
25. WAS DIRECTIONAL SURVEY MADE No						26. TYPE ELECTRIC AND OTHER LOGS RUN GR-N	
27. WAS WELL CORED No						28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
7		26		224		8-3/4	
4-1/2		10.5		3533		6-3/4	
				DV @ 3307'			
29. LINER RECORD						30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		PACKER SET (MD)	
						None	
						None	
31. PERFORATION RECORD (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
3404-08 1 HPF 0.38" Jet						DEPTH INTERVAL (MD)	
3411-26 1 HPF 0.38" Jet						AMOUNT AND KIND OF MATERIAL USED	
3438-42 1 HPF 0.38" Jet						3404-3442	
						37,000 gal Western Foam	
						9000# 20-40 & 55,000# 10-20	
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
11-13-80		Flowing				Shut-in	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
11-15-80		1		2"		→	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
1000		275		→		0	
						GAS—MCF.	
						42.5	
						WATER—BBL.	
						tr load	
						GAS-OIL RATIO	
						N/A	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
Vented, will be sold						Larry Tholkes	
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED		TITLE				DATE	
Dwight Schuster		Operations Manager				11-18-80	

*(See Instructions and Spaces for Additional Data on Reverse Side)

1980

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF. CORED INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Fruitland	2997	(-3608')
				Pictured Cliff	3391	(-3214')