ASE မီရီမွန် ဋ ချစ်မှ Jicarilla Contract 147

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

5. LEASE

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

	Jicarilla Apache
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(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.)	20 20 20
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas 🗓 other	Jicarilla Contract 147
well well so other  2. NAME OF OPERATOR	9. WELL NO. (2.1 6 5 11 11 11 11 11 11 11 11 11 11 11 11 1
	10. FIELD OR WILDCAT NAME
AMOCO PRODUCTION COMPANY  3. ADDRESS OF OPERATOR	Basin Dakota
	11. SEC., T., R., M., OR BLK. AND SURVEY OR
501 Airport Drive Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA NW/4 SW/4 Section 7,
	T25N, R5W
	12. COUNTY OR PARISH 13. STATE
AT SURFACE: T25N R5W AT TOP PROD. TINTERVAL:	Rio Arriba NM
AT TOTAL DEPTH: Same	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-039-22018
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
•	6754 GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	0754 GE
TEST WATER SHUT-OFF	
FRACTURE TREAT	
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
PULL OR ALTER CASING UMBER STATE STA	triange on Form 3-350,
CHANGE ZONES	
ABANDON*	
(other) Completion	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is different measured and true vertical depths for all markers and zones pertiner. Completion operations commenced on 7/2/79. Operation to 5000 psi; held OK. x 2 SPF of .4" diameter; total of 48 holes. gallons frac fluid, 173,500 pounds sand and 2 well to clean up. Landed 2-3/8" production to Completion rig released on 7/6/79.	irectionally drilled, give subsurface locations and it to this work.)*  Cleaned out to PBD of 7500' and Perforated 7238-58', 7280-84'  Sand-water fraced with 73,500 MSCF of nitrogen. Flowed
Subsurface Safety Valve: Manu. and Type  18. I hereby certify that the foregoing is true and correct  Original Signer by  SIGNED	- DATE
APPROVED BY TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	