

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
CURTIS J. LITTLE

3. ADDRESS OF OPERATOR
P. O. Box 1258, Farmington, NM 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 515' FNL & 875' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

5. LEASE
SF-080136

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
SALAZAR

9. WELL NO.
12

10. FIELD OR WILDCAT NAME
Otero Chacra Ballard PC

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 21 T25N-R6W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6318' GR

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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☐

RECEIVED

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

AUG 19 1985

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.)*

8-12-85 Spud 9:30 p.m. Drld. 130', 12½" hole. Ran 127' of 8 5/8" 24# Casing w/60 sx Class "B", 2% CaCl. (71 CF). Circulated 7 bbls. to pit. Plug down 3:45 p.m. on 8-11-85. WOC 12 hrs. Tested 500 psi. Held ok.

8-19-85 TD 3335' on 8-17-85. Schlumberger TD 3332'. Ran 81 jts. 4½" 10.5# K-55 Casing to 3329' KB PBTD 3288' KB Cemented w/280 sx (434 C.F.) 65/35 pozmix w/6% gel & ¼# Hiseal followed by 170 sx (175 C.F.) 65/35 poz w/2% gel. Plug down 6:00 p.m. on 8-17-85. WOC

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

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

SIGNED CURTIS J. LITTLE TITLE OPERATOR DATE 8-19-85
(This space for Federal or State Office Use)

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

AUG 21 1985
OIL CON. DIV.
DIST. 3

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY _____