

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1474.

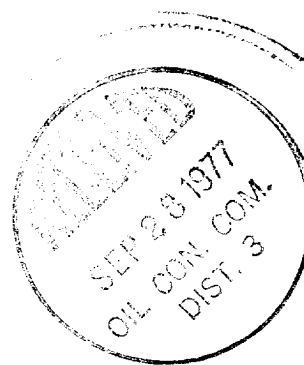
## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

|                                                                                                                                                                                                   |                                               |                                                                                                  |                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>                                                                                  |                                               | 5. LEASE DESIGNATION AND SERIAL NO.<br><b>Jicarilla Apache 102</b>                               |                                             |
| 2. NAME OF OPERATOR<br><b>AMCO PRODUCTION COMPANY</b>                                                                                                                                             |                                               | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br><b>Jicarilla Apache</b>                                  |                                             |
| 3. ADDRESS OF OPERATOR<br><b>501 AIRPORT DRIVE, FARMINGTON, NEW MEXICO 87401</b>                                                                                                                  |                                               | 7. UNIT AGREEMENT NAME                                                                           |                                             |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br><b>1010' FSL x 1565' FEL, Section 9, T-26-N, R-4-W</b> |                                               | 8. FARM OR LEASE NAME<br><b>Jicarilla Apache 102</b>                                             |                                             |
| 14. PERMIT NO.                                                                                                                                                                                    |                                               | 9. WELL NO.<br><b>25</b>                                                                         |                                             |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br><b>7158' GL</b>                                                                                                                                 |                                               | 10. FIELD AND POOL, OR WILDCAT<br><b>Tapacito Pictured Cliffs</b>                                |                                             |
|                                                                                                                                                                                                   |                                               | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br><b>SW/4 SE/4 Section 9<br/>T-26-N, R-4-W</b> |                                             |
|                                                                                                                                                                                                   |                                               | 12. COUNTY OR PARISH<br><b>Rio Arriba</b>                                                        |                                             |
|                                                                                                                                                                                                   |                                               | 13. STATE<br><b>New Mexico</b>                                                                   |                                             |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data                                                                                                                     |                                               |                                                                                                  |                                             |
| NOTICE OF INTENTION TO:                                                                                                                                                                           |                                               |                                                                                                  |                                             |
| TEST WATER SHUT-OFF <input type="checkbox"/>                                                                                                                                                      | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>                                                          | REPAIRING WELL <input type="checkbox"/>     |
| FRACTURE TREAT <input type="checkbox"/>                                                                                                                                                           | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input checked="" type="checkbox"/>                                           | ALTERING CASING <input type="checkbox"/>    |
| SHOOT OR ACIDIZE <input type="checkbox"/>                                                                                                                                                         | ABANDON* <input type="checkbox"/>             | SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>                                        | ABANDONMENT* <input type="checkbox"/>       |
| REPAIR WELL <input type="checkbox"/>                                                                                                                                                              | CHANGE PLANS <input type="checkbox"/>         | (Other) <input type="checkbox"/>                                                                 | (Other) <input checked="" type="checkbox"/> |
| (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)                                                                                             |                                               |                                                                                                  |                                             |

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.)\*

Moved in service unit 9/19/77. Pressure tested casing blowout preventer with 3400 psi for 15 minutes. Perforated 3850-3894' with 1 SPF. Pumped in 9500 pounds sand and frac line broke. Pressured to 3500 psi, and perfs plugged. Well would not flow. Cleaned out with N2 to 3886' after tagging sand at 3587'. Sand foam fraced with 12,000 gal pad frac fluid, 30% water and 70% nitrogen by volume, 240,000 pounds 10-20 sand and 120,000 gallons frac fluid. Average injection rate 40 BPM. Dropped 25 balls midway thru frac. Flushed to highest perforation. Maximum treating pressure 2250 and minimum 1900. Average 2100 psi. Breakdown pressure 2000 psi. Cleaned out well and landed 1-1/4" 24# J-55 tubing at 3893'.



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

SIGNED

TITLE

Area Adm. Supvr.

DATE

9/23/77

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

RECEIVED

\*See Instructions on Reverse Side

SEP 26 1977

U. S. GEOLOGICAL SURVEY  
DURANGO, COLO.

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law 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.

**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 17:** Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.