

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Budget Bureau No. 42-1424

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 ☐ gas ☒ other ☐

2. NAME OF OPERATOR
Oklahoma Oil Company

3. ADDRESS OF OPERATOR
1120 One Energy Square, Dallas, TX 752 06

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1730' FNL & 975' FWL
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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Completion ☐

☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE NOO-C-1420-5369
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Navajo 4
9. WELL NO. 1
10. FIELD OR WILDCAT NAME Nipp Pictured Cliff
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA Sec 4, T25N, R12W
12. COUNTY OR PARISH San Juan
13. STATE New Mexico
14. API NO.
15. ELEVATIONS (SHOW DE KOB; AND WD) 6097 GL

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

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.)*

The Pictured Cliff formation was perforated from 1044 to 1048 with 2 shots per foot. Natural production was less than 40 MCFD.

The interval was acidized with 250 gallon 15% "Gas Well Acid." After swabbing, it flowed at 216 MCFD up the 2 7/8" casing.

The well was shut in for AOF.

Resultant AOF was 318 MCFD.

The location will be prepared for production in accord with requirements of the Navajo Irrigation Project.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED John Alexander TITLE Agent DATE 12-13-77

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

