

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Consolidated Oil & Gas, Inc.		8. FARM OR LEASE NAME HUEBFANO COM	
3. ADDRESS OF OPERATOR P.O. Box 2038, Farmington, New Mexico 87499		9. WELL NO. 1E	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1835' FWL & 790' FNL (NE/NW)(C)		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
14. PERMIT NO. API # 30-045-25961		12. COUNTY OR PARISH San Juan	
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 6722' KB		13. STATE N.M.	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) "Conclude Drlg. Op'ns" <input checked="" type="checkbox"/>	

(Other) ☐ (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.)

6-1-84 Drilled 7-7/8" hole to TD (6490') @ 5:30 PM. Circ & prep to log.

6-2-84 Ran IES, SP, GR, FDC, CNL, CAL, GR logs from TD to surface.
Ran 5-1/2" casing as follows:
8 jts, 17#, N-80 from setting depth of 6490' to 6184' KB.
147 jts, 15.5#, J-55 from 6184' to surface.
Float collar at 6449' & DV tools at 4641' & 2069'.
Cemented 1st stage w/ 459 cu ft 50/50 poz, 2% gel, & 1/4# celloflake per sk. Good circ. Plug down @ 10:00 PM. Drop bomb & open DV tool.

6-3-84 Cemented 2nd stage w/ 640 cu ft 65/35 poz, 6% gel, & 1/4# celloflake & 6-1/4# gilsonite/sk. Tail in w/ 595 cu ft 50/50 poz, 2% gel, & 1/4# celloflake/sk. Circ out 50 bbl. Plug down 3:19 AM. Drop bomb & open DV tool. Cemented 3rd stage w/ 520 cu ft 65/35 poz, 6% gel, 6-1/4# gilsonite & 1/4# celloflake/sk. Tail in w/ 434 cu ft 50/50 poz, 2% gel, 1/4# celloflake/sk. Circ out 15 bbl. Plug released @ 7:30 AM. Set slips, cut off casing, & release rig.
PBTD(FC) 6449'
TD(Driller's) 6490'
DV tools 4641' & 2069'

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

SIGNED Barbara E. Rex TITLE Prod. & Drlg. Technician DATE 6-5-84

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

NMOCC

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA