

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 <input type="checkbox"/> GAS <input checked="" type="checkbox"/> WELL WELL OTHER	5. LEASE DESIGNATION AND SERIAL NO. NM 010850
2. NAME OF OPERATOR Consolidated Oil & Gas, Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 2038, Farmington, New Mexico 87499	7. UNIT AGREEMENT NAME
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)	8. FARM OR LEASE NAME HUERFANO COM
14. PERMIT NO.	9. WELL NO. 1E
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	10. FIELD AND POOL, OR WILDCAT Basin Dakota
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 30, T25N, R9W
	12. COUNTY OR PARISH 13. STATE

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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input 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.)

6-16-84 Perf Dakota from 6372-6419' w/ 1 SPF, .38" (48 perfs).  
6-18-84 Set Baker mod R3 pkr @ 6008'. Pr backside to 1000 psi. Broke down w/ 1% KCL wtr. ISIP 1000 psi. Pump 750 gal 7-1/2% HCl w/ 72 balls. Balled off @ 3500 psi. Knock off balls & TOH w/ pkr. Frac w/ 2380 bbl 30# gel wtr w/ 1% KCl & 1 gal surfact/1000 gal & 105,000# 20/40 sand as follows: 30,000 gal pad, 35,000 gal w/ 1 PPG sd, 35,000 gal w/ 2 PPG sd, displace w/ 153 bbl 1% KCl wtr. ISIP 2200, 15 min 1800. Job complete @ 11:30 AM. 2880 bbl to recover.  
6-19/21 Swabbing & cleaning up.  
6-22-84 Ran 1-1/2", 2.9#, J-55, tbg landed @ 6387'KB. Swabbing & cleaning up to test.

Note: Due to contractual situation the Gallup zone is not being completed at this time.

RECEIVED

AUG 15 1984

OIL CON. DIV.

DIST. 3

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

SIGNED

*Barbara C. Rex*

TITLE Prod. & Drlg. Technician DATE 7-13-84

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

AMOCO

ACCEPTED FOR RECORD

DATE

AUG 14 1984

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY

*SM*