

**UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.  
**SF 079596**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
**C. M. Morris "C"**

9. WELL NO.  
**1**

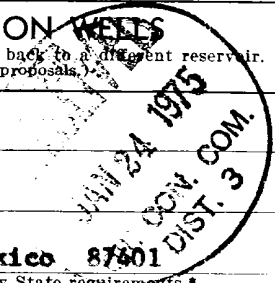
10. FIELD AND POOL, OR WILDCAT  
**Fulcher Kutz Pictured Cliffs**

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
**SE/4 NW/4 Section 14,  
T-27-N, R-10-W**

12. COUNTY OR PARISH  
**San Juan**

13. STATE  
**New Mexico**

**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  GAS WELL  OTHER

2. NAME OF OPERATOR  
**AMOCO PRODUCTION COMPANY**

3. ADDRESS OF OPERATOR  
**501 Airport Drive, Farmington, New Mexico 87401**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface  
**1650' PNL & 1650' FWL, Section 14, T-27-N, R-10-W**

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
**6134' GL**

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 checked="" type="checkbox"/>	ALTERING CASING <input checked="" 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 PLANS <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.)\*

**12-2-74 Pulled 1" tubing, ran 3-1/2" casing and circulated to bottom with 600 barrels water. Cemented 3-1/2" casing set at 2106' with 200 sacks Class "B" with 6% Gel and 2 pounds medium Tuf Plug per sack followed with 50 sacks Class "B" Neat on 12-3-74. WOC. Ran a cement bond log. Tested 3-1/2" casing to 1500 psi and casing raised out of wellhead 1". Shut down pump pressure and dropped to 200 psi. Pressured up and pumped in with 3/4 BPM at 2100 psi. Loaded backside and pumped down casing 1 BPM at 2000 psi. Did not circulate backside. Pressured backside with 500 psi 1/4 hour OK. Set cast iron bridge plug at 2070' and tested casing and bridge plug with 3000 psi 1/4 hour OK. Perforated interval 2028-42' with 2 SPF. Displaced hole with 1% KCl water and spotted 250 gallons 15% HCl acid. Breakdown pressure 2300 psi. Pumped in with 2 BPM at 1800 psi. Pumped 3500 gallon pad containing 1% KCl and 10 pounds Gel per 1000 gallons. Fraced with 34,610 gallons water containing above additives and 25,000 pounds 10-20 sand and 15,000 pounds 8-12 sand. No breakdown. Pumped in at 2000 psi with average treating pressure 2100 psi. AIR 30 BPM. Tagged sand at 2038' and circulated and cleaned out to 2070' PBD. Landed 1-1/4" tubing at 2034'. Ran swab and swabbed well dry, recovering water. Shut well in 86 hours with CPC & TPC 0. 12-17-74 circulated down tubing and out casing with nitrogen, unloaded 3 barrels water and well dried up. Shut in well for pressure buildup until 12-31-74 and then blew for 2 hours. Alternately shut in and flowed well to clean up. Reconnected well to sales line 1-9-75. Production before repair 32 MCFD and after repair 172 MCFD.**

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

SIGNED *B.L. Hamilton* TITLE Area Adm. Supvr. DATE January 22, 1975

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

JAN 25 1975

## **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.