

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 ☐
well well

2. NAME OF OPERATOR
Husky Oil Company

3. ADDRESS OF OPERATOR
600 So. Cherry St., Denver, CO 80222

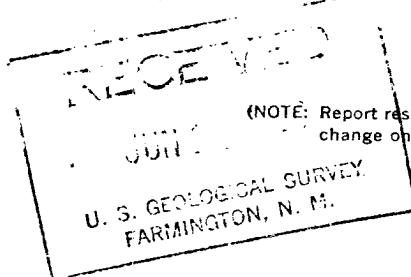
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990' FSL and 990' FEL (SE-SE)
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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) Ran production casing



5. LEASE

SF-078872A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bolack "B"

9. WELL NO.

1-E

10. FIELD OR WILDCAT NAME

Basin, Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 16-27N-11W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6284' GR

(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.)*

Ran 160 jts 4½", 10.5#, K-55, ST&C csg (6633'). Set @ 6642' KB. Shoe @ 6642', Float Collar @ 6603'. Cemented w/3 stages (total of 1250 sx). Ran as follows:

1st stage @ 6642' - 250 sx 50/50 Pozmix + 6% Gel + ¼ pps Flocele followed w/75 sx Class "B" + 2% CaCl₂.

2nd stage @ 3519' - 600 sx 50/50 Pozmix + 6% Gel + ¼ pps Flocele followed w/75 sx Class "B" + 2% CaCl₂.

3rd stage @ 1083' - 400 sx 50/50 Pozmix + 6% Gel.
CIP @ 8:00 AM 5/1/80.

Subsurface Safety Valve: Manu. and Type

BY

Set @

Ft.

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

SIGNED

Francis M. Skuzgane TITLE Eng. Aide

DATE June 13, 1980

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: