

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 well ☐ gas well ☒ other ☐
2. NAME OF OPERATOR
DEPCO, Inc.
3. ADDRESS OF OPERATOR
1000 Petroleum Building - Denver, CO 80202
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FNL, 790' FWL (NW/4 NW/4)
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

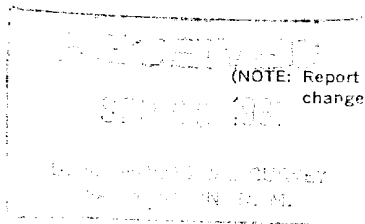
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

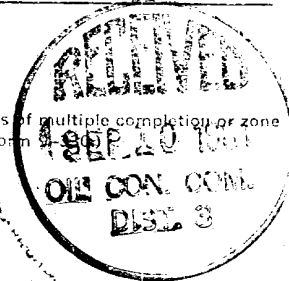
TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
☒
☐
☐
☐
☐
☐
☐
☐
☐



(NOTE: Report results of multiple completion or zone change on Form 9-331-C)



5. LEASE
SF078896
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
--
7. UNIT AGREEMENT NAME
--
8. FARM OR LEASE NAME
Federal 33
9. WELL NO.
11
10. FIELD OR WILDCAT NAME
West Kutz P.C.
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 33-T27N-R11W
12. COUNTY OR PARISH
San Juan
13. STATE
NM
14. API NO.
30-045-24795
15. ELEVATIONS (SHOW DF, KOB, AND WD)
6211' GR 6223' KB

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.)*

6-28-81 MIRU Aztec Well Service completion unit.

6-30-81 Circ 1% KCL wtr w/clay stabilizing agents & surfactants. Spot 250 gal 7 1/2% HCL @ 1810' KB. Perfd Pictured Cliffs form 1768-88' KB w/2 JSPP. Foam-frac perfd intervals using 70-quality foam containing 50,000 gal KCL wtr, 60,000# 20/40 & 10/20 sd, 20 ball sealers, & 369,000 SCF N2. Avg treating pressure 850 psi, avg foam pumping rate 188 BPM.

7-01-81 Cleaned well out to 1850' KB.

7-02-81 12 hr SICP 327 psi. Ran 53 jts, 1768.85', 1" NUE, 1.70#, CW55, 10rd thd tbg landed @ 1778' KB. Well unloaded to pit.

7-03-81 Flw well to cln up. SI for 7-day period preceding deliverability & CAOF determination.

- O V E R -

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Wm S. Schuman Prod. Supt.-So. DATE August 27, 1981
Rockies

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE EPT - SEP 20 1981

NMOCC

SEP 9 1981

*See Instructions on Reverse Side

BY Wm S. Schuman

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.

GPO : 1976 O - 214-149

8-20-81 Perform 3-hr deliverability test. Q - 374 MCF/D, FCP - 387 psi,
CAOF - 2.608 MMCF/D, SICP - 410 psi.

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
DEPCO, Inc.

Address
1000 Petroleum Building - Denver, CO 80202

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
Federal 33	SF078896	11	West Kutz P.C.	State, Federal or Free
Location				
Unit Letter <u>D</u> ; <u>790</u> Feet From The <u>North</u> Line and <u>790</u> Feet From The <u>West</u>				
Line of Section <u>33</u> Township <u>27N</u> Range <u>11W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico	P. O. Box 1899, Bloomfield, NM
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	No -

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 3-17-81	Date Compl. Ready to Prod. 8-12-81	Total Depth 1915' KB	P.B.T.D. 1850' KB					
Elevations (DF, RKB, RT, GR, etc.) 6211' GR 6223' KB	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 1768' KB	Tubing Depth 1778' KB					
Perforations 1768' - 88' KB	Depth Casing Shoe 1901' KB							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	139' KB	100 SX					
7-7/8"	4-1/2"	1901' KB	375					
	1"	1778' KB						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Bbls.

GAS WELL

Actual Prod. Test-MCF/D 374	Length of Test 3 hr	Bbls. Condensate/MMCF 0	Ratio of Condensate to Gas - DIST. 3
Testing Method (pilot, back pr.) Back Pr.	Tubing Pressure 18 psi	Casing Pressure 387 psi	Choke Size 3/4"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Wm. S. Schwenn
(Signature)
Production Superintendent-Sou. Rockies
(Title)
August 27, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 10 1981
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.