

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT - " for such proposals

5. Lease Designation and Serial No.  
**NM 013860 A**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
**Russell 3E**

9. API Well No.  
**3004525260**

10. Field and Pool, or Exploratory Area  
**Basin Dakota**

11. County or Parish, State  
**San Juan Mexico**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
**Amoco Production Company** Attention: **Lois Raebrun**

3. Address and Telephone No.  
**P.O. Box 800, Denver, Colorado 80201** (303) 083-05294

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**1850 FSL <sup>800</sup> 1850-FEL Sec. 25 T 28N R 8W**

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <b>Wellbore changes</b>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*  
**Amoco Produciton Company request permission to do Wellbore chages.**

See attached Rocedures.

If you should have any questions please call Stan Kolodzie @ 830-4769

RECEIVED  
MAY 31 1994  
OIL CON. DIV.  
DIST. 3  
RECEIVED

14. I hereby certify that the foregoing is true and correct  
Signed Lois Raebrun Title Business Assistant Date 05-18-1994

(This space for Federal or State office use)  
Approved by \_\_\_\_\_ Title \_\_\_\_\_  
Conditions of approval, if any:

APPROVED  
MAY 25 1994  
ACTING MANAGER

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.

REPERF & LOWER TUBING.  
RUSSELL#3E - Run 47  
May 16, 1994  
WORKOVER PROCEDURE

Procedure:

1. Move in rig. Rig up. Nipple up blowout preventer.
2. Kill well, if necessary. Use only the minimum volume to kill fluid - with 2% KCl water.
3. Pull out of hole Dakota 2 3/8" tubing string.
4. Run in hole 4 1/2" bit scraper and clean out liner to PBTD at 7063'. Circulate out cuttings with nitrogen.
5. Install lubricator.
6. Allow well to unload kill fluid, if possible. Perforating should be done with the minimum pressure possible in the casing to allow the new perfs to clean themselves out. Perforate the following intervals with 3 1/8" casing gun, 2 JSPF, 120 degree phasing.

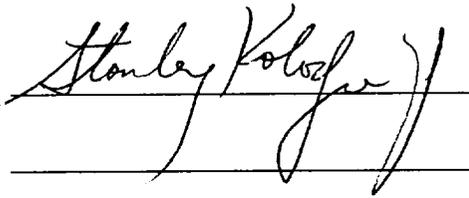
	Intervals
Dakota:	6979 - 6991
	7078 - 7082
	7064 - 7068
	7099 - 7105
	7128 - 7136
	7141 - 7174

Total of 146 shots

7. Rerun 2 3/8" tubing with mule shoe in next to last joint. Set tubing at approximate 7174' - depth of the lowest perforation.
8. Spot 500 gal methanol to bottom of tubing. Displace methanol into Dakota with nitrogen. Allow methanol to soak for 12 hours.
9. Nipple down blowout preventer. Hook up well to production equipment.
10. If necessary, swab in well. Return to production. Well may make 200-300 barrels of water or condensate when production is restored.

AUTHORIZATIONS:

ENGINEER:



PRODUCTION FOREMAN:

\_\_\_\_\_

WORKOVER FOREMAN:

\_\_\_\_\_

Amoco Production Company

**WELL REPAIR AUTHORIZATION AND REPORT**

ORIGINAL BLANK CORRECTION 5 DELETION 9

LEASE/UNIT NAME AND WELL NUMBER <b>Russell #3E</b>		HORIZON NAME <b>Dakota</b>	
FIELD <b>Basin Dakota</b>	COUNTY <b>San Juan</b>	STATE <b>NM</b>	
OPERATOR <b>Amoco</b>	OPERATIONS CENTER/DIVISION <b>SJOC</b>	ELEVATION <b>6220</b>	ELE. REFERENCE PT <b>KB</b>
LAST PRODUCING WELL ON LEASE YES <input type="checkbox"/> NO <input type="checkbox"/>		T.D. <b>7225</b>	P.B.T.D. <b>7210</b>
		LOCATION <b>25I-28N-8W, 1850 fsl, 800 fel</b>	

FLAC (WELL) NO  
**979776**

HORIZON CODE  
**01**

CONTROL DATE  
MO DAY YR

AMOCO WORKING INTEREST <b>0.5</b>	OTHER WORKING INTERESTS <b>Conoco - 0.5</b>		
AMOCO NET INTEREST <b>0.4225</b>	TOTAL REPAIR HORIZONS <input checked="" type="checkbox"/>	STATUS AFTER REPAIR PRODUCING <input checked="" type="checkbox"/>	INJECTION <input type="checkbox"/>
	PRODUCTION INCREASE EXPECTED		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

**TYPE JOB** SELECT ONE MAJOR (1) AND MAXIMUM THREE MINOR (2)

CONVERT TO INJECTION... <input type="checkbox"/>	CONVERT TO PROD..... <input type="checkbox"/>	DEEPEN..... <input type="checkbox"/>
WATER FRAC..... <input type="checkbox"/>	OIL FRAC..... <input type="checkbox"/>	ACID FRAC..... <input type="checkbox"/>
ACIDIZE..... <input type="checkbox"/>	REPAIR CASING..... <input type="checkbox"/>	WHIPSTOCK..... <input type="checkbox"/>
PLUG BACK..... <input type="checkbox"/>	PERFORATE..... <input checked="" type="checkbox"/>	CEMENT SQUEEZE..... <input type="checkbox"/>
WASHING SAND..... <input type="checkbox"/>	SAND CONTROL..... <input type="checkbox"/>	OTHER..... <input checked="" type="checkbox"/>
SET LINER OR SCREEN..... <input type="checkbox"/>	PULL LINER OR SCREEN... <input type="checkbox"/>	

TREATING VOLUME - GAL.  DIVISION REPAIR CODE

**ESTIMATED COST**

**INTANGIBLES**

RIG COST	6000.00
EQUIPMENT RENTAL	1000.00
CIRCULATING EQUIPMENT	3000.00
CEMENT AND SERVICE	0.00
PACKERS AND EQUIPMENT	1500.00
PERFORATE, LOG, WIRELINE	7000.00
STIMULATION	2000.00
LABOR	1000.00
SPECIAL EQUIPMENT	0.00
FISHING	0.00
OTHER INTANGIBLES	2500.00
<b>TOTAL INTANGIBLES</b>	<b>24000.00</b>

**GROSS PRODUCTION**

	BEFORE	ANTICIPATED	UNIT PRICE
OIL.....BOPD	<input type="text" value="0"/>	2	\$/BBL <input type="text" value="10.00"/>
WATER.....BWPD	<input type="text" value="0"/>	10	
GAS.....MCFD	<input type="text" value="21"/>	200	\$/MCF <input type="text" value="1.65"/>
OTHER /DAY	<input type="text" value="0"/>	0	\$/UNIT <input type="text" value="0.00"/>

EXPECTED PAYOUT **5.7** MONTHS

**TANGIBLES**

CSG., TBG., HEAD, ETC.	0.00
<b>TOTAL GROSS COST</b>	<b>\$ 24000.00</b>
AMOCO WORKING INTEREST COST	12000.00

**REASON FOR WORK**

This well has logged off frequently due to high tubing setting and has a high decline rate due to limited entry.

Notice To Nonoperator: Costs shown on this form are estimates only. Nonoperators should not consider these estimates as establishing any limit on monies which will be required to perform the proposed operation.

Nonoperator \_\_\_\_\_  
By \_\_\_\_\_ Date \_\_\_\_\_

**REPAIR RESULT** SUCCESS  FAILURE

DATE REPAIR COMPLETED MO. DAY YR.

**GROSS PRODUCTION DURING PAYOUT**

OIL.....BOPD	<input type="text"/>	GAS.....MCFD	<input type="text"/>
WATER.....BWPD	<input type="text"/>	OTHER..... /DAY	<input type="text"/>

**GROSS INJECTION**

RATE.....BPD OR MCFD	<input type="text"/>	PRESSURE..... PSIG	<input type="text"/>
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ESTIMATED FINAL GROSS COST

**RECOMMENDED** DATE

AUTHORIZED

*Stanley K. [Signature]*

MO. DAY YR.  
**05 16 94**