

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

Amoco Production Company

3. ADDRESS OF OPERATOR

501 Airport Dr. Farmington, NM

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1550' FSL x 840' FEL

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:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) spud and set casing

RECEIVED (NOTE: Report on multiple completion or zone change on Form 9-330.)

JUN 10 1983

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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.)*

Moved in and rigged up rotary tool 4-21-83, and spudded a 12 1/4" hole. Drilled to 350' and landed 8 5/8", 24#, K-55 casing at 338'. Cemented with 360 cu. ft. class B cement containing 2% CaCl₂. Circulated 48 cu. ft. good cement to surface. Pressure tested casing to 800 PSI. Drilled a 7 7/8" hole co and reached a TD of 6223' on 5-3-83. Ran 4 1/2", 10.5, K-55 casing and landed it at 6211'. Cemented first stage with 539 cu. ft. class B 50:50 POZ. Cemented second stage with 1359 cu. ft. class B 65:35 POZ cement. Tailed in both stages with 118 cu. ft. class B neat cement. Circulated cement to surface on first stage and cement top on second stage is 600'. DV tool was set at 4231. Released rig on 5-3-83.

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

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

SIGNED _____ TITLE Administrative Supervisor DATE 6-8-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOC

ACCEPTED FOR RECORD

JUN 17 1983

FARMINGTON DISTRICT

BY