

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

300452068500

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Gerk Gas Com D

8. Well No.

#1

9. Pool name or Wildcat

Aztec Pictured Cliffs

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Amoco Production Company Gail M. Jefferson, Rm 1295C

3. Address of Operator

P. O. Box 800, Denver, Colo. 80201 (303) 830-6157

4. Well Location

Unit Letter C : 700 Feet From The North Line and 920 Feet From The West Line

Section 30

Township 29N

Range 9W

NMPM

San Juan

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☒

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

MIRUSU 2/9/96. Pulled 62 joints of 1.25" tbg.

Squeezed perms from 1782'-1988' with 75 sxs Class B neat. Avg rate 1.5 bpm, max rate 2.0 bpm. SD WOC. TIH tag TOC at 1782'. Load and pressure test production casing to 750# for 15 mins. Held ok.

Cemented inside production casing from 1500'-1782' with 20 sxs Class B. Average rate 1.5 bpm, max rate 2.0 bpm. Cemented from 0-1000' inside production casing with 62 sxs Class B. Avg rate 1.5 bpm, max rate 2.0 bpm.

Cut off well head, install marker. RDMOSU 2/12/96.

RECEIVED
FEB 28 1996

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Gail M. Jefferson

TITLE Sr. Admin. Staff Asst.

DATE 2/26/96

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

James Carlson

TITLE

N.M. O.C.D. Deputy
Oil & Gas Inspector

DATE

3-29-96

CONDITIONS OF APPROVAL, IF ANY: