

OIL CONSERVATION DIVISION  
P. O. BOX 2000  
SANTA FE, NEW MEXICO 87501

NO. OF DEEPENING PERMITS	
DISTRICT OFFICE	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
 State  Fee

5. State Oil & Gas Lease No.

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. OIL WELL  GAS WELL  OTHER-

7. Unit Agreement Name

2. Name of Operator  
Amoco Production Company

8. Farm or Lease Name  
Duff Gas Com

3. Address of Operator  
501 Airport Drive, Farmington, NM 87401

9. Well No.  
1

4. Location of Well  
 UNIT LETTER D 790 FEET FROM THE North LINE AND 1015 FEET FROM  
 THE West LINE, SECTION 34 TOWNSHIP 30N RANGE 12W NMPM.

10. Field and Pool, or WHdcat  
Basin Dakota

15. Elevation (Show whether DF, RT, GR, etc.)  
5621' GL

12. County  
San Juan

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
		OTHER _____ <input type="checkbox"/>	

17. 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.

Amoco Production Company plans to clean out the wellbore damage of the subject well and return it to production as per the attached procedure. Work will commence upon approval.

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

SIGNED John Robinson TITLE Administrative Supervisor DATE January 3, 1983

APPROVED BY FRANK J. HAYEZ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

OPERATIONS TO BE PERFORMED: (Circle One)

Recompletion

Service

LEASE AND WELL Lang Co. No. 1

FIELD B.

FORMATION Dawson

LOGS SP. GR - IEL - Sonic

LOCATION 700 FNL X 1015 FNL Sec 34 T30N R12W

COMP. DATE 3/7/62

EL: 5621 RDB

TD: 6425

PBD: 6354

CSG. 8 5/8" 24 # STFC @ 354'; 4 1/2" 10.5 # STFC @ 6425'

COMP. INT. 6319 - 6203

ORIG. STIM. 6319-6275 SWHF 70,900 gal  
6276-6203 SGHF 27,783 gal

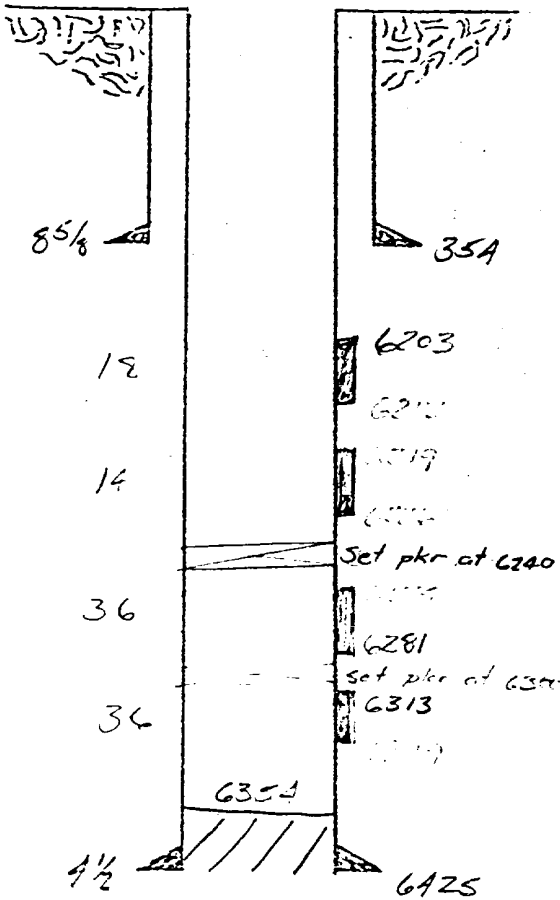
IP 2130 MOFD AOF

CURRENT PROD. INT. None

PURPOSE: Clean out wellbore damage & return to production

WELLBORE SKETCH

PROCEDURE



1. Clean out to PBD
2. Trip out with 2 3/8" production tubing
3. Trip in with 2 3/8" tubing, packer, and retrievable bridge plug. Set bridge plug at 6325
4. Spot 300 gal 15% HCL and set packer at 6300
5. Pressure up on backside and pump acid away at a rate no more than 3 BPM.
6. Overflush acid with 100 gal 2% HCL water
7. Flow well back immediately. Swab if necessary to recover all bad liquids before proceeding.
8. Move bridge plug to 6300
9. Spot 300 gal 15% HCL and set packer at 6240

10. Pressure up on backside and pump acid away at a rate no more than 3 BPM.
11. Over-flush with 100 gal 2% HCL water
12. Flow well back immediately. Swab if necessary to recover all bad liquids
13. Trip out with tubing, packer, and bridge plug
14. RUN tubing AND LAND AT APPROXIMATELY 6319', SWAB, AND TEST.

Notes

1. Acid must be recovered as soon as possible to minimize formation damage
2. Do not exceed a treating pressure of 1800 psi.
3. Acid additives will be limited to 2 gal of inhibitor and 2 gal of surfactant only!

RECEIVED

JAN 04 1983

OIL CON. DIV. DIST. 3

Approved: A.W. Blosson  
By: Del H. [unclear]

1/3/83

[Signature]  
10-19-82