Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1190' FSL x 930' FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

5. LEASE
SF-078200

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
W. H. Riddle

9. WELL NO.
3

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SW/4, SW/4, Section 24, T30N, R10W

12. COUNTY OR PARISH
San Juan

13. STATE
NM

14. API NO.
30-045-20538

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6306' GL

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)		

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

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.)*

Amoco Production Company plans to repair tubing leak and check for casing leak in the above well per the attached procedure. Work will commence upon approval.

Verbal approval given 3-2-83

RECEIVED
MAR 3 - 1983
OIL CON. DIV.
DIST. 3

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

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

SIGNED Original Signed By B.T. Roberson TITLE Admin. Supvr. DATE 2-25-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
MAR 02 1983
JAMES F. SIMS
DISTRICT ENGR.

*See Instructions on Reverse Side

NMOCC

FARMINGTON DIVISION

OPERATIONS TO BE PERFORMED: (Circle One) Recompletion (Repair) Service

LEASE AND WELL W. H. Riddle No. 3 FIELD BASIN DAKOTA DHS

FORMATION BASIN DAKOTA LOGS Induction - Electric, Accoustilog

LOCATION 1190' FSL X 930' FWL SEC 24, T30N, R10W

COMP. DATE 9-24-69 EL: 6320' KB TD: 7554' PBD: 7520'

CSG: 8 5/8" 24 # K-55 @ 358 ': 4½" 10.5# K-55 @ 7554'

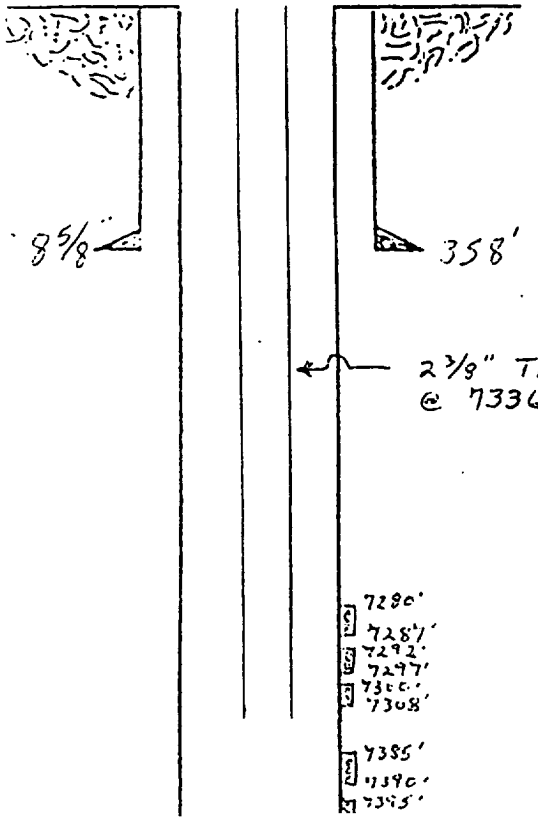
COMP. INT. 7285' - 7402' ORIG. STIM. SWF X 96850 gal fluid X 75,000 pounds sd

IP 2464 MCFD (AOF 2695) CURRENT PROD. INT. SAME

PURPOSE: REPAIR tubing LEAK and check for CASING LEAK

SDB DHS JMS GOM RWO 2/FF PJS ENGR. FILE

WELLBORE SKETCH



PROCEDURE

1. Blow well down & pull tubing.
2. Wireline set a tubing retrievable bridge plug at 7200 ft.
3. Close blind rams and pressure te casing to 1500 psi for 15 minut
4. If casing does not hold pressur Trip in with packer and tubing, hydrotesting tubing going in. Isolate leak with packer and re interval to main office.
5. If casing holds pressure retrieve bridge plug.
6. Trip in with tubing, hydrotesting