

Form 9-331  
(May 1963)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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—" for such proposals.)

|  |  |   |                 |
|--|--|---|-----------------|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER  |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>NM 012708                      |                 |
| 2. NAME OF OPERATOR<br>Lively Exploration Company  |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                  |                 |
| 3. ADDRESS OF OPERATOR<br>Box 234, Farmington, NM 87401  |  | 7. UNIT AGREEMENT NAME  |                 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>1500' FSL - 1190' FWL |  | 8. FARM OR LEASE NAME<br>Lively                                       |                 |
| 14. PERMIT NO.   |  | 9. WELL NO.<br>25   |                 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>5878' GR   |  | 10. FIELD AND POOL, OR WILDCAT<br>Basin Dakota                        |                 |
|  |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec 29, T30N, R8W |                 |
|  |  | 12. COUNTY OR PARISH<br>San Juan                                      | 13. STATE<br>NM |

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

Completion

X

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

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.)\*

10-25-75

PBTD 7090'. Rigged up Halliburton, reverse circulated hole until clean, pressure tested csg and BOP to 4000 psi - held OK. Spotted 300 gal 15% HCl on btm, pulled out of hole, Go International ran gamma-ray correlation log, perf 2 jets/ft 6964-68' and 7016-20', broke fm down and established IR 25 B/M @ 3500 psi, perf 2 jets/ft 7076-80', 6860-64', and 6872-76'. Halliburton frac well using 1956 HP, 60,000 lbs 20-40 sd 4000 gal wtr for pad, 69,700 gal wtr treating fluid and 4750 gal wtr flush, IF 3400 psi, Min 3250 psi, Max 4000 psi, Ave 3800 psi, Final 3850 psi, ISIP 1900 psi, 10-min shut in 1650 psi, Ave IR 21 B/M, Max IR 26 B/M, shut well in 30 min, flowed well to pit overnight.

10-26-75

PBTD 7090'. Well kicked off flowing by heads. Ran 218 jts 1-1/4" OD 2.4# JCW 10R EUE tbg set @ 7070' RKB, tagged sd @ 7077', installed wellhead, well still flowing by heads, no est on volume, shut well in.

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

SIGNED

Thomas A. Dugan

TITLE

Engineer

RECEIVED  
NOV 13 1975  
CON. COM.  
DIST 3

DATE 11-10-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NOV 12 1975