Thereby certify that the information above is true and complete to the best of my knowledge and belief.    District III	_			of New M			Form C-10		
DISTRICT   POT Bot 780, Hobbs, NM 88240  DISTRICT   FOO NOT USE THIS FORM FOR PROPOSALS TO BRILL OR TO DECPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" FORM COIL FOR SHIP OF THE PROPOSALS TO BRILL OR TO DECPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" FORM COIL FOR SHIP OF THE PROPOSALS TO BRILL OR TO DECPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" FORM COIL FOR FOR PROPOSALS.  1. Type of Well: WELL API NO.  SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO BRILL OR TO DECPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" FORM COIL FOR FOR PROPOSALS.  1. Type of Well: WELL API NO.  SUNDRY NOTICES AND REPORTS ON WELLS  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Correction  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Greater  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Correction  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Correction  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Greater  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Greater  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Correction  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Correction  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Correction  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Greater  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Correction  7. Lease Name or Unit Agreement Name Elliott Gas Com /F/  ### Notice Correction  8. Well No.  1. Advance Operator  8. Well No.  9. Pool name or Widest  8. Well No.  9. Pool name or Widest  8. Well No.  1. Lease Name or Unit Agreement Name Elliott Gas Com /F/  9. Pool name or Widest  8. Well No.  1. Lease Name or Unit Agreement Name Elliott Gas Com /F/  9. Pool name or Widest  8. Well No.  1. Lease Name or Unit Agree	Submit 3 Copies to Appropriate District Office	Energ	gy, Minerals and	l Natural I	Resources Department		Revised 1-	1-89	
Santa Fe, New Mexico 87504-2088   Santa Fe, New Mexico 97504-2088   Sant	DISTRICT I			WELL API NO					
DISPECT II TOO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PROPOSALS."    Type of Well:	DISTRICT II P.O. Drawer DD, Artesia, NM 88210  Santa Fe, New Mexico 87504-2088					5. Indicate Typ			
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:  WELL	DISTRICT III					6. State Oil &		FEE 🔼	
COD NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPER OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"									
Other Well   GAS   OTHER   Altention: Altention: Mike Curry   1A    2. Name of Operator   Altention: Mike Curry   1A    3. Address of Operator   Altention: Mike Curry   1A    3. Address of Operator   Operator   Operator   Operator   Operator   Operator   Operator   Operator    4. Well Location   Unit Letter   P   1244   Feet From The   South   Line and   820   Feet From The   East   L    Section   33   Township   30N   Range   9W   NMPM   San Juan   County    10. Elevation (Show whether DF, REB, RT, GR, etc.)   5594 KB    11.   Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data   NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:    PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING    TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND ABANDONMENT    PULL OR ALTER CASING   OTHER:   Casing Repair   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.  Check for casing leak and repair if necessary.  The Business Analyst   DATE   O5-07-1993	(DO NOT USE THIS FOR DIFFERI	M FOR PROP	OSALS TO DRILL DIR. USE "APPLIC	OR TO DE	EPEN OR PLUG BACK TO PR PERMIT"		•		
2. Name of Operator AMOCO PRODUCTION COMPANY  Mike Curry  Mike Curry  1A  3. Address of Operator P.O. Box 800 Denver Colorado 80201 (303) 830-4075  9. Pocl name or Wildcast Blanco Mesaverde  9. Pocl name or Wildcast Blanco Mesaverde  1. Well Location Unit Letter P: 1244 Feet From The South Line and 820 Feet From The East L Section 33 Township 30N Range 9W NMPM San Juan County  10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5594 'KB  11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING  TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT  CASING TEST AND CEMENT JOB  OTHER: Casing Repair 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.  Check for casing leak and repair if necessary.  Thereby certify that the information above is true and complete to the best of my knowledge and belief.  Business Analyst  DATE 05-07-1993.		GAS X	OTHER						
3. Address of Operator P.O. Box 800 Denver Colorado B0201 (303) 830-4075 9. Pool name or Wildcat P.O. Box 800 Denver Colorado B0201 (303) 830-4075 9. Pool name or Wildcat Well Location Unit Letter P: 1244 Feet From The South Line and 820 Feet From The East 1  Section 33 Township 30N Range 9W NMPM San Juan County 10. Elevation (Show whether DF, RRR, RT, GR, etc.) 5934 KB  11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB  OTHER: Casing Repair X 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.  Check for casing leak and repair if necessary.  PLUG AND ABANDON CHANGE PLANS CASING TEST AND CEMENT JOB  NAY1 3 1993 OIL CON. Discrete Proposed or Completed Operations of Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  Check for casing leak and repair if necessary.  PLUG AND ABANDON CHANGE PLANS CASING TEST AND CEMENT JOB  NAY1 3 1993 OIL CON. Discrete Plug And Abandon Change Plug And Abandon Change Plug And Abandon Ment Change Plug And Abandon Change Plug And Aban		WELL L		ttention:		8. Well No.			
P.O. Box 800    Proposed of Colorado   Bo201   GS03) 830-4075   Blanco Mesaverde	AMOCO PRODUCTION COMPANY				Mike Curry	0.7-1			
Unit Letter P: 1244 Feet From The South Line and 820 Feet From The Last I.  Section 33 Township 30N Range 9W NMPM San Juan County  10. Elevation (Show whether DF, RRB, RT, GR, etc.) 5694 'KB  11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  REMEDIAL WORK ALTERING CASING  TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB OTHER:  Casing Repair OTHER:  12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of storting any proposed work) SEE RULE 1103.  Check for casing leak and repair if necessary.  PRECEIVED IN THE STAND CONTROLLED TO		er	Colorado	80201	(303) 830-407	5 9. Pool name		<u> </u>	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5694' KB  11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK	4. Well Location Unit Letter P	: 1244	Feet From The	So	uth Line and	820 Feet Fi	rom The East	t Line	
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NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK			10. Eleva	tion (Show w		tc.)			
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK	11. C	heck Appi	opriate Box t	o Indica	te Nature of Notice	, Report, or Ot	her Data		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING CASING TEST AND CEMENT JOB OTHER:  Casing Repair  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.  Check for casing leak and repair if necessary.  RECEIVEMENT AND CEMENT JOB OTHER:  MAY1 3 1993  OIL CON. DIDENT. 3  Thereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE Musiness Analyst  DATE O5-07-1993			_			SUBSEQUENT	REPORT OF:		
PULL OR ALTER CASING  OTHER:  Casing Repair  Casing Poposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  Check for casing leak and repair if necessary.  Region Poposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  Check for casing leak and repair if necessary.  Region Poposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  Check for casing leak and repair if necessary.  I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  Business Analyst  DATE  O5-07-1993	PERFORM REMEDIAL WO	RK 🔲	PLUG AND ABAI	NDON _	REMEDIAL WORK		ALTERING CASIN	G [	
OTHER:	TEMPORARILY ABANDON		CHANGE PLANS		] COMMENCE DRILL	ING OPNS.	PLUG AND ABAN	DONMENT	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE	12. Describe Proposed or Co	ompleted Opera		all pertinent	details, and give pertinent d	lates, including estimat	ed date of starting any	proposed	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE	Check for casing lea	k and repair	if necessary.			EGEI	93		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE						MATIO	rvo.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE						OIL CON.	יוטי ז		
SIGNATURE						Dio			
	I hereby certify that the in	formation abov	e is true and comple	ete to the bes	et of my knowledge and belie	f.	05.0	7 1002	
	SIGNATURE	enfu C	my		TITLE	ioos raidiyst	DATE		
TYPE OR PRINT NAME MIKE CUTTY TELEPHONE NO. (1999) 499	TYPE OR PRINT NAME		Mike Curry				TELEPHONE NO. (3	03) 830-407	

(This space for State Use) TITLE SUPERVISOR DISTRICT # 3 DATE MAY 1 3 1993 Original Signed by FRANK T. CHAVEZ

CONDITIONS OF APPROVAL, IF ANY:

CARREST C. C.

ELLIOT GAS COM F#1A 33P-30N-9W

512- 500 - 9W

COMP 12/76, 5681' 6L

PC 2334 CH 3949 IMN 4119 PL 4569

95/8" 32,3 H40 C5A 256'

PONDED 100 SX
DOWN BROWHEND

1 SDF: 3934-38 3952-83 3993-4060

4084 - 54

4112

4275-79

4338 - 42

4498-4507

4539

4556-92

460-24

4638-70

4195 4706 4760-62 TOP OF 41/2" LSA 2523'

7" Zo# K55 CSA 2725'

23/5" TLA 4762'

412" 10.5# K55 C5A 4850'

TD 4850' PBTD 4804'

FCS - 1 1 5

## ELLIOTT GAS COM F #1A SEC 33P-30N-9W

## **WORKOVER PROCEDURES**

OBJECTIVE: Check for casing leak and repair if necessary.

- 1. Note casing, tubing and bradenhead pressures.
- 2. Test anchors. Install if necessary.
- 3. MIRUSU.
- 4. Blow well down. Kill w/2% KCL water if necessary.
- 5. NDWH. NOBOP.
- 6. Pick up tbg and tag PBTD.
- 7. Tally OOH w/2-3/8" tbg. Visually inspect and replace bad joints as needed.
- 8. TIH w/scraper to top of 4-1/2" liner. POOH.
- 9. TIH w/4-1/2" scraper to 3875.' POOH.
- 10. TIH w/RBP x Pkr. Set RBP at 3850. Pull up one stand x set pkr x pressure test RBP to 1000#.
- 11. Test backside to 1000#.
- 12. Contact Sandi Braun w/results of pressure test. If casing does not test isolate leak and establish rate and pressure. Check for circulation to surface.
- 13. Additional procedures will follow based on results.

