

NEW MEXICO OIL CONSERVATION COMMISSION

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LAND OFFICE	
OPERATOR	/

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name Bruington Gas Com "D"
9. Well No. 1
10. Field and Pool, or Wildcat Aztec Pictured Cliffs
12. County San Juan

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-
2. Name of Operator AMOCO PRODUCTION COMPANY
3. Address of Operator 501 Airport Drive Farmington, NM 87401
4. Location of Well UNIT LETTER <u>A</u> <u>1160</u> FEET FROM THE <u>North</u> LINE AND <u>1125</u> FEET FROM THE <u>East</u> LINE, SECTION <u>21</u> TOWNSHIP <u>30N</u> RANGE <u>11W</u> NMPM.

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

5655' GL, 5765' KB

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOBS ☐

OTHER ☐

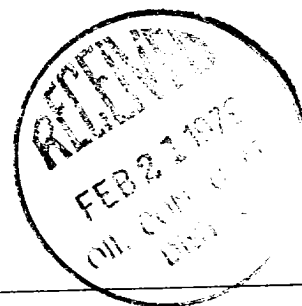
ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

Completion ☒

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.

Completion operations commenced on 2/3/79. Pressure tested casing to 3800 psi; held OK. Perforated 2132-2170' with 2 SPF; total of 76 holes. Foam fraced with 491,470 SCF of N<sub>2</sub>, 65,600 pounds SN and 38,300 gallons frac fluid consisting of 2% KCL, 6 gallons ADA foam per 1000/gallons, 30% water by volume and 70% N<sub>2</sub> by volume. Tagged sand at 2334'. Did not clean out. The 2-3/8" production tubing was landed at 2164'.



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

SIGNED E. E. Kendrick TITLE District Adm. Supervisor

DATE 2/19/79

Original Signed by A. R. Kendrick

APPROVED BY

TITLE SUPERVISOR DIST.

DATE

FEB 21 1979

CONDITIONS OF APPROVAL, IF ANY: