

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0135  
Expires November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**

*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

5. Lease Serial No.

SF-078118

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

J.E. DECKER 3B

9. API Well No.

30-045-30320

10. Field and Pool, or Exploratory Area

BLANCO MESA VERDE

11. County or Parish, State

SAN JUAN

NM

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

GREAT WESTERN DRILLING COMPANY

3a. Address

P.O. BOX 1659 MIDLAND TX 79702

3b. Phone No. (include area code)

(915)682-5241

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660 FWL & 1980 FNL

SEC 17; T-32-N; 11W

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Casing Report &amp; Casing Test</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

12/28/2000 TD surface hole @ 330'. Ran 7 jst 9 5/8" 36# J-55 csg to 330' and cemented w/ 220 sx Class B w/ 2% Calcium Chloride & 1/4# / sx flocele. Circ 20 sx cement. Plug down @ 9:15 AM 12/27/00.  
12/29/2000 Finish nipple up & test blind rams to 2,000 psi. Test pipe rams & casing to 2,000 psi for 30 minutes-OK.  
12/31/2000 TD 8 3/4" hole @ 3,639'. Ran 83 jts 7" 20# J-55 csg to 3,634'. Cement 1st stage w/ 695 sx 65/35 POZ containing 10% gel, 2% CaCl, 1/4# / sx Celloflake, & 4# / sx gilsonite followed by 100 sx Type III containing 2% CaCl, 1/4 # / celloflake & 4# / sx Gilsonite. Cement 2nd stage w/ 278 sx 65/35 POZ containing 10% gel, 2% CaCl, 1/4# / sx celloflake and 4# / sx Gilsonite. Plug down at 11:45 PM 12/31/00. Circ 15 bbls cement on 1st stage & 5 bbls cement on 2nd stage.  
01/02/2001 Finish nipling up & test blind rams to 2,000 psi for 30 minutes - OK. Test pipe rams & casing to 2,000 psi for 30 minutes - OK.  
01/06/2001 TD 6 1/4" hole @ 6,018' at 6:00 AM 1/6/01.  
01/08/2001 Ran 138 jts 4 1/2" 10.5# J-55 csg, set at 6,003'. Cemented w/ 190 sx 35/65 Type III Poz cement containing 6% gel, 3% salt, 1/4# / sx Celloflake, 4# / sk Gilsonite, 0.2% CD-32 and 0.4% FL-52. Plug down at 7:30 PM 1/7/01.

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

Name (Printed/Typed)

GINA KING

Title

PRODUCTION TECHNICIAN

Date

05/15/2001

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

**ACCEPTED FOR RECORD**

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

NMOCD

OFFICE  
5/15/2001