

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED 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 ☐ other2. NAME OF OPERATOR
SUNDANCE OIL COMPANY3. ADDRESS OF OPERATOR
#510, 1776 Lincoln St., Denver, CO 802034. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FSL, 660' FEL, Unit P
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

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RECEIVED

JUN 12 1980

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

(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.)*

Pulled rods & tubing. Set RTTS at 4038'. Pumped 50 sx Class C cement w/2% CaCl_2 and flushed to perforations. Pumped 100 sx Class C w/2% CaCl_2 , 6/10 of 1% D-19. Pumped 100 sx Class C, 2% CaCl_2 , 6/10 of 1% D-19. Pumped 200 sx Class C, 2% CaCl_2 , 1/4# cello flakes. Pumped 200 sx Class C, 2% CaCl_2 . Tagged cement at 3978'. Drilled out at 4228'. Pressured up to 2000#, held. Perforated 4146-56' and 4168-78' w/2 spf. Swabbed, no fluid in hole. Acidized w/1000 gal. 20% NE. Swabbed back load. Put well on pump. Well making 74 BOPD and 73 BWPD.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED Richard O. Dimit TITLE V-P, Production DATE June 10, 1980

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE DATE