

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

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.)

NM 0555838-1
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR

George E. Coleman

8. FARM OR LEASE NAME

Easter Flats

3. ADDRESS OF OPERATOR

P.O. Box 1915, Farmington, New Mexico 87401

9. WELL NO.

4

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

10. FIELD AND POOL, OR WILDCAT

Wildcat

1900' FNL and 1900' FWL

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 7, T20N, R5W

14. PERMIT NO.

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

6722 GR

12. COUNTY OR PARISH

McKinley

13. STATE
New Mexico

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*

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.)*

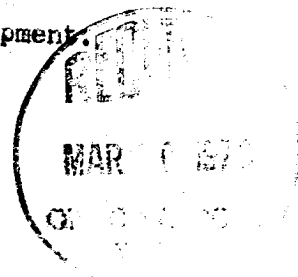
1-18-76 Run correlation collar logs. Perforate Point Lookout 2828-2835 with 2 jets per foot. Run 2 3/8" tubing. Swab test.

1-19-76 Swab Test

1-20-76 Fracture treat Point Lookout perforations 2828-2835 with 16,800 gallons WF-40, 6000# 100 mesh sand and 16,000# 20-40 mesh sand. Maximum and minimum treating pressure 1650 psi and 900 psi. Immediate SIP - 600 psi, decreasing to 500 psi in 10 minutes. Average injection rate 15 BPM. Total Load 430 barrels.

1-21-76 &

1-23-76 Swab and recover load. Preparing to set production equipment.



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

SIGNED

Jack D. Cook

TITLE

Agent

(This space for Federal or State office use)

DATE 3-3-76

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side