

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

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.)

1. ☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

JOEL B. BURR JR.

3. ADDRESS OF OPERATOR

SUITE 300  
300 W. ARRINGTON FARMINGTON, NEW MEXICO 87401

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

990° FNL 2310° FWL

14. PERMIT NO.

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

6760 G.L.

5. LEASE DESIGNATION AND SERIAL NO.

N M 15646

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

N A

8. FARM OR LEASE NAME

ROBINSON-COLEMAN

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

FRANCISCAN LAKE MV

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

SEC 13 T20N R6W

12. COUNTY OR PARISH

McKINLEY

13. STATE

N.M.

16. 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 ☐

CHANGE OF OPERATOR

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(Note: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

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.)\*

DESIGNATION OF OPERATOR WAS NOT GIVEN TO GEORGE E. COLEMAN.

THIS WELL SHALL REMAIN IN THE OPERATORSHIP OF JOEL B. BURR JR.

ALL SUBSEQUENT WELLS ON THIS LEASE SHALL ALSO BE OPERATED BY

JOEL B. BURR JR.

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

SIGNED R. D. SIMMONS

TITLE ENGINEER

DATE 3-22-78

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side