

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR JACK A. COLE		8. FARM OR LEASE NAME RINCON
3. ADDRESS OF OPERATOR P. O. BOX 191, FARMINGTON, NEW MEXICO 87499		9. WELL NO. 5
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 740' FNL, 680' FEL		10. FIELD AND POOL, OR WILDCAT COUNSELORS GALLUP DAKOTA
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NE 1/4 NE 1/4 SEC. 5-T23N-R6W
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6811' GR		12. COUNTY OR PARISH RIO ARRIBA
		13. STATE NEW MEXICO

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) SPUD AND SET SURFACE <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.) \*

7-2-89 SPUD 4:15 P.M. TD-266'. RAN 6 JOINTS 8 5/8", 24.0 LB. J-55 CASING MEASURED 247.42'. SET AT 261.42. CEMENTED WITH 250 SACKS (295 FT.<sup>3</sup>) CACL AND 1/4 LB. FLOCELE PER SACK. PLUG DOWN 12:45 A.M. 7-3-89.

7-3-89 PRESSURE TEST CASING TO 600 PSI FOR 30 MINUTES. TEST OKAY.

RECEIVED

JUL 14 1989

OIL CON. DIV.  
DIST. 3

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

SIGNED Dwayne Blaise

TITLE PRODUCTION SUPERINTENDENT

DATE JULY 5, 1989

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

ACCEPTED FOR RECORD

JUL 11 1989

FARMINGTON RESOURCE AREA

BY KH

\*See Instructions on Reverse Side