

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

SF-078359

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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

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.

10

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

LYBROOK GALLUP

1650' FNL, 1650' FWL

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

SW 1/4 NE 1/4

SEC. 13-T23N-R7W

14. PERMIT NO.

15. ELEVATIONS (Show whether SP, FT, GR, etc.)
7003 GR

12. COUNTY OR PARISH 13. STATE

RIO ARRIBA 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
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) SPUD & SET SURFACE

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.)*

JULY 18, 1989 Spud 5:00 P.M. TD- 280'. Ran 6 joints 8 5/8 24.0 lb. J-55 casing. Measured 258.00'. Set at 272.00 KB. Cemented with 250 sacks (295 ft.) Class B, 3% CACL and 1/4 lb. Flocele per sack. Plug down 11:45 P.M. Circulated 15 bbls. cement.

JULY 19, 1989 Pressure test casing to 600 psi for 15 minutes. Test okay.

RECEIVED
JUL 31 1989
OIL CON. DIV
DIST. 3

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

SIGNED Douglas Blonick TITLE Production Superintendent DATE July 24, 1989

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ ACCEPTED FOR RECORD

JUL 27 1989

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

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