

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 ☒ GAS WELL ☐ OTHER ☐	3. LEASE DESIGNATION AND SERIAL NO. SF-078362
2. NAME OF OPERATOR JACK A. COLE	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. BOX 191, FARMINGTON, NEW MEXICO 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 430' FNL, 457' FEL 520	8. FARM OR LEASE NAME RINCON
14. PERMIT NO.	9. WELL NO. 7
15. ELEVATIONS (Show whether OF, HT, GR, etc.) 7076 GR 7088 KB	10. FIELD AND POOL, OR WILDCAT COUNSELORS GALLUP DAKOTA
	11. SEC., T., R., X., OR BLK. AND SURVEY OR AREA NE 1/4 NE 1/4 SEC. 6-T23N-R6W
	12. COUNTY OR PARISH 13. STATE RIO ARRIBA NEW MEXICO

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(Other) SET SURFACE CASING	☒		☒

(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.)

6-11-'89 SPUD 1:00 A.M. TD-270'. RAN 6 JOINTS 8 5/8", 24.0 LB. J-55 CASING, MEASURED 251.48 FEET, SET AT 265.48. CEMENTED WITH 250 SACKS (295 FT.) CLASS "B", 3% CACL AND 1/4 LB. FLOCELE PER SACK. PLUG DOWN 9:15 A.M. CIRCULATED 15 BBLs. CEMENT.

PRESSURE TEST CASING TO 600 PSI FOR 15 MINUTES. TEST OKAY.

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

SIGNED Dwayne Blanchett TITLE PRODUCTION SUPERINTENDENT DATE JUNE 12, 1989

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD

JUN 21 1989

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

NMOCD