

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. 13
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1820' FNL 2130' FEL		10. FIELD AND POOL, OR WILDCAT LYBROOK- <i>Gallop</i>
14. PERMIT NO.		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA SW 1/4 SE 1/4 SEC. 1-T23N-R7W
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6827 GR 6841 KB		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) SET PRODUCTION CASING <input checked="" 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.)*

SHE ATTACHED FOR CASING AND CEMENT SUMMARY.

RECEIVED
OCT 1 9 1989
OIL CON. DIV

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

SIGNED *Louanna Blissett* TITLE PRODUCTION SUPERINTENDENT DATE SEPTEMBER 17, 1989

This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL IF ANY:

TITLE _____

ACCEPTED FOR RECORD

OCT 05 1989

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

BY *KIT*

Casing and Cement Summary

September 14, 1989 TD-5625'. Ran 135 joints, 4 1/2", 11.60 lb., J-55 casing. Measured 5606.21, set at 5618.21. Float collar-5558.43 (KB), Stage collar- 3973.50 (KB). First stage cemented as follows:

Pump 10 bbls. fresh water, 10 bbls. CaCl_2 water, 10 bbls. fresh water, 12 bbls. Flocheck-21, 10 bbls. water spacer followed by 425 sacks, (633 cu. ft.) 50-50 pozmix, 2% gel, 6 1/4 lbs. Gilsonite and 6 lbs. salt per sack. Plug down 12:30 A.M. 9-15-89.

Circulated cement by stage collar. Circulated 4 hours between stages.

Second stage - same spacer program as the first stage followed by 600 sacks, (1644 cu. ft.) 65-35 pozmix, 12% gel, 6 1/4 lbs. Gilsonite per sack followed by 50 sacks, (59 cu. ft.) Class "B" cement. Plug down 6:00 A.M. 9-15-89. Circulated 60 bbls. cement.