

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved
Budget Bureau No. 100-1135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SF 078362

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 ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

JACK A. COLE

3. ADDRESS OF OPERATOR

P. O. BOX 191, FARMINGTON, NEW MEXICO 87499-0191

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

370' FNL x 1660' FWL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

RINCON

9. WELL NO.

14

10. FIELD AND POOL, OR WILDCAT

LYBROOK GALLUP

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

NE/4 NW/4

SEC. 11-T23N-R7W

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, AT, OR, ETC.)

6963' GR

6977' KB

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:

TEST WATER SHUT-OFF

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

REPAIRING WELL

☐
☐
☐
☒

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) RE-SEED

(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 perti-
nent to this work.) *

AUGUST 30, 1991 - RESEEDED LOCATION.

RECEIVED

OCT 9 1991

OIL CON. DIV.
DISC.

ACCEPTED FOR RECORD
FARMINGTON RESOURCE AREA

OCT 07 1991

FARMINGTON, NEW MEXICO

BY

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

SIGNED

Jack A. Cole

TITLE

OPERATOR

DATE

SEPT. 24, 1991

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL IF ANY:

*See Instructions on Reverse Side

NMOCD