

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

30-043-05280

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☐OTHER WildcatSINGLE
ZONE ☒MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Charles M. Goad d/b/a Gola Oil Co.

3. ADDRESS OF OPERATOR

11912 Euclid Crt. NE, Albuquerque, N.M.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)

At surface

1550 FNL, 1850 FNL, Sec. 4 T17N-R3W

At proposed prod. zone

Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

30 miles southwest Cuba, N. M.

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. unit line, if any)

790 feet

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

None

16. NO. OF ACRES IN LEASE

440.76

17. NO. OF ACRES ASSIGNED

40

19. PROPOSED DEPTH

600 feet

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

6440 GR

22. APPROX. DATE WORK WILL START*

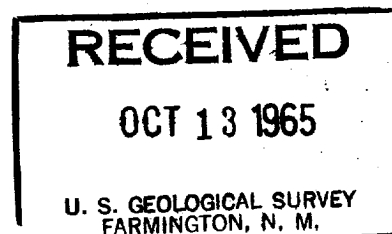
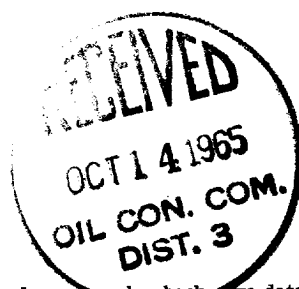
Oct. 13, 1965

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
8 3/4	7"	18 lb	20'	10 sz
3 1/2	2 7/8	6 lb	600'	40 sz

Plan to drill a 3 1/2" hole to approximately 600 feet in depth to test Mesaverde sands for oil. If oil is encountered plan to set 2 7/8" casing to total depth & complete by perforating sand zone. No pressures are expected in this area & I do not plan to set surface casing.



IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

Charles M. Goad

TITLE

Operator

DATE

Oct. 12, 1965

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

41

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*NSL - hold e-104
GOD approval*

*See Instructions On Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, as indicated, on all types of lands and leases for appropriate action by either a Federal or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 1: If the proposal is to redrill to the same reservoir at a different subsurface location or to a new reservoir, use this form with appropriate notations. Consult applicable State or Federal regulations concerning subsequent work proposals or reports on the well.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 14: Needed only when location of well cannot readily be found by road from the land or lease description. A plat, or plats, separate or on this reverse side, showing the roads to, and the surveyed location of, the well, and any other required information, should be furnished when required by Federal or State agency offices.

Items 15 and 18: If well is to be, or has been directionally drilled, give distances for subsurface location of hole in any present or objective production zone.

Item 22: Consult applicable Federal or State regulations, or appropriate officials, concerning approval of the proposal before operations are started.

NEW MEXICO OIL CONSERVATION COMMISSION Pool
WELL LOCATION AND ACREAGE DEDICATION PLAT

53630

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

043-05280

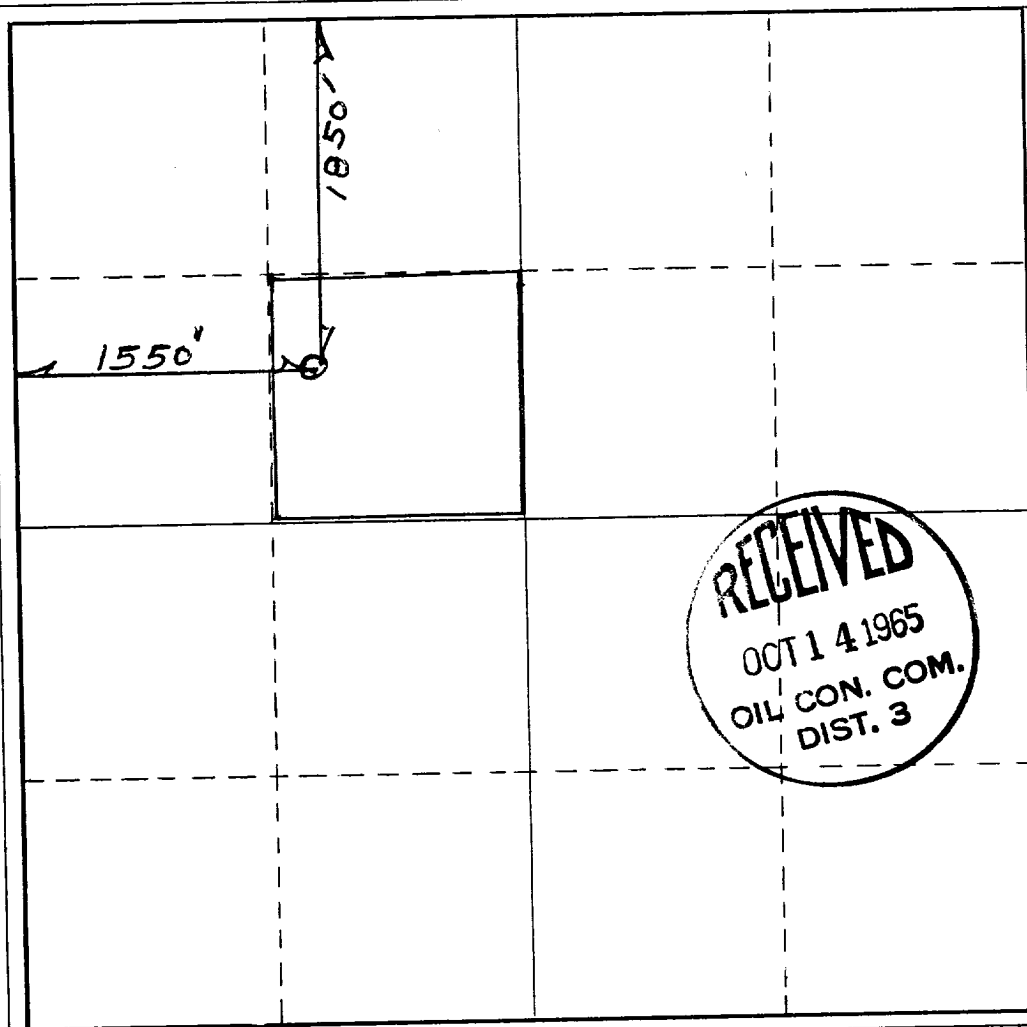
Operator Charles M. Goad, d/b/a Gola Oil Co.			Lease MND397100 - Gola		Well No. #2 Gola
Unit Letter F	Section 4	Township 17 north	Range 3 west	County Sandoval	
Actual Footage Location of Well: 1550 feet from the west line and 1850 feet from the north line					
Ground Level Elev. 6440	Producing Formation no coverde (wildcat)		Pool None	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation **One ownership**

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Charles M. Goad

Name
Charles M. Goad

Position
Operator

Company
Gola Oil Co.

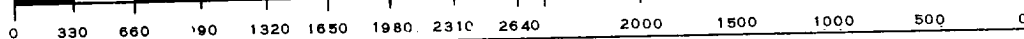
Date
Oct. 12, 1965

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
Oct. 9, 1965

Registered Professional Engineer and/or Land Surveyor
Val R. Reese
Val R. Reese

Certificate No.
C.F.O. 662



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0557100

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Federal

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

~~Charles M. Goad~~ Gola

9. WELL NO.

2 Gola

10. FIELD AND POOL, OR WILDCAT

S. San Luis Mesa Verde

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

Sec. 4, T17N-R3W

12. COUNTY OR PARISH

Sandoval

13. STATE

N. M.

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 ☐

2. NAME OF OPERATOR
Charles M. Goad d/b/a Gola Oil Co.

3. ADDRESS OF OPERATOR
11912 Euclid Crt. N.E. Albuquerque, N. M.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1550 FNL, 1830 FNL, Sec. 4 T17N-R3W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6417 GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) First Report

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

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.)*

Spud in date 10-27-65 Drilled a 6 1/2" hole to a depth of 380' set 369' of 4" I.D. 9 lb casing. On 10-30-65 cemented casing by circulating 40 sacks of type 1 cement & held under pressure for 48 hours. Casing has been capped while we are completing well no. 6 Gola. No electric logging or coring has been done.

(Over)

RECEIVED

NOV 10 1965

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

RECEIVED

NOV 22 1965

OIL CON. COM.
DIST. 3

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

SIGNED

Charles M. Goad

TITLE

Operator

DATE

11-14-65

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1963-O-686229
897-651

0-40	Shale & sand
40-45	Sand, grey-white, scattered florescence
45-55	Shale & sand, florescence
55-58	Shale, brown, sandy, some coal
58-71	Sand, grey, bright florescence, some oil in pit
71-72	Coal
72-115	Shale
115-120	Shale, bentonitic sand, no odor, good florescence
120-198	Shale & sand
198-212	Sand, florescence, good odor, oil increase on pit
212-316	Shale
*316-355	Sand, bright yellow floresc. , strong odor, free oil
355-356	Sand becoming bentonitic, scattered florescence
356-375	Bentonitic sand
375-380	Sand & shale, no odor
380	T.D.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0557100

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Federal

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

Charles M. Goad

9. WELL NO.

2 Gola

10. FIELD AND POOL, OR WILDCAT

S. San Luis Mesa Verde pool

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

Sec. 4, T17N-R3W

12. COUNTY OR PARISH

Sandoval

13. STATE

N. M.

1.

OIL ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

Charles M. Goad d/b/a Gola Oil Co.

3. ADDRESS OF OPERATOR

11900 Morrow NE Albuquerque, N. M. 87112

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

1550 FWL, 1850 FNL, Sec. 4 T17N-R3W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6417 GR

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) Temporary abandon ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

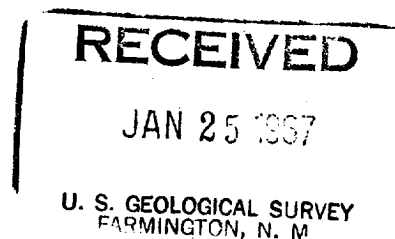
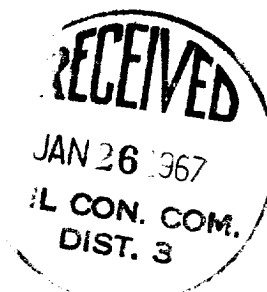
ABANDONMENT* ☐

(Other) ☐

(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.)*

Request for permit for temporary abandonment is requested from the
commission under rule 202, paragraph C.
Site & pit has been cleared of debris & ground has been leveled.
Top of casing has been capped. Request temporary abandonment while
negotiations for water flooding are looked into. No further work
has been done on well since last report of 11-14-65.



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

SIGNED

Charles M. Goad

TITLE

Operator

DATE

1-23-67

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

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Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

File

XERO COPY XERO COPY XERO COPY

NEW MEXICO OIL CONSERVATION COMMISSION
1000 Rio Brazos Road
Aztec, New Mexico
July 19, 1967

U.S.G.S.
P.O. Box 959
Farmington, New Mexico

Gentlemen:

Notice of Intention to Drill was filed on Gola Oil Co., Gola #2,
located E-4-17N-3W (Sand. Co.). ~~No further information has been re-~~
~~ceived.~~ Please indicate status of well.

_____ Location abandoned, well was never spudded.
_____ Drilling well.
_____ Work completed, completion forms to follow.

Remarks:

Please send Well Log and Status Report on the above well.

Very truly yours,


L. Street #3, Supervisor

cc: Gola Oil Co.
Albuquerque, New Mexico
NMOCC, Santa Fe, N.M.

NEW MEXICO OIL CONSERVATION COMMISSION
1000 Rio Brazos Road
Aztec, New Mexico
July 19, 1967

U.S.G.S.
P.O. Box 959
Farmington, New Mexico

Gentlemen:

Notice of Intention to Drill was filed on Gola Oil Co., Gola #2,
located F-4-17N-3W (Sand. Co.). ~~No further information has been re-~~
~~ceived.~~ Please indicate status of well.

_____ Location abandoned, well was never spudded.
_____ Drilling well.
_____ Work completed, completion forms to follow.

Remarks:

Please send Well Log and Status Report on the above well.

*T.D. 380 T.A. 1-27-67 N.M. OCC Approval Rule 202 - C
waiting on water flood*

Very truly yours,

Emmy C. Christ
District #3, Supervisor

cc: Gola Oil Co.
Albuquerque, New Mexico
NMOCC, Santa Fe, N.M.



THE
UNITED STATES OF AMERICA
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

1000

TO THE SECRETARY OF THE INTERIOR
FROM THE DIRECTOR OF THE BUREAU OF LAND MANAGEMENT
SUBJECT: [Illegible]

1. [Illegible]
2. [Illegible]
3. [Illegible]
4. [Illegible]
5. [Illegible]

Very truly yours,
[Illegible]
Director

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:				OIL WELL ☐	GAS WELL ☐	DRY ☒	Other _____				
b. TYPE OF COMPLETION:				NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____		
2. NAME OF OPERATOR								Charles M. Goad d/b/a Gola Oil Co.			
3. ADDRESS OF OPERATOR								1100 Morrow NE, Albuquerque, N. Mex. 87112			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)								At surface 1550 FWL, 1850 FNL, Sec. 4 T17N-			
At top prod. interval reported below											
At total depth											
14. PERMIT NO.								12. COUNTY OR PARISH			
								Sandoval			
15. DATE SPUDDED								13. STATE			
10-27-65								N. M.			
16. DATE T.D. REACHED								19. ELEV. CASINGHEAD			
10-28-65								6419			
17. DATE COMPL. (Ready to prod.)								20. TOTAL DEPTH, MD & TVD			
Dry								300			
21. PLUG, BACK T.D., MD & TVD								22. IF MULTIPLE COMPL., HOW MANY*			
23. INTERVALS DRILLED BY								24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*			
→								None			
25. WAS DIRECTIONAL SURVEY MADE								26. TYPE ELECTRIC AND OTHER LOGS RUN			
None								None			
27. WAS WELL CORRED								No			
28. CASING RECORD (Report all strings set in well)											
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
1" I.D.		9 LB		369		6 1/2 "		40 sacks		None	
29. None LINER RECORD										30. None TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE	
										DEPTH SET (MD)	
										PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number)										32. None ACID, SHOT, FRACTURE, CEMENT-SQUEEZE, ETC.	
None											
										DEPTH INTERVAL (MD)	
										AMOUNT AND KIND OF MATERIAL USED	
										SEP 14 1967	
										U. S. GEOLOGICAL SURVEY	
										FARMING	
33.* None PRODUCTION											
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						WELL STATUS (Producing or shut-in)			
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
										WATER—BBL.	
										GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.	
										OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)										TEST WITNESSED BY	
35. LIST OF ATTACHMENTS											
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records											
SIGNED <u>Charles M. Goad</u>				TITLE <u>Operator</u>				DATE <u>9-12-67</u>			

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
	58 198 316	71 212 355	Sand Sand Sand Free oil in all sand samples			

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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.)

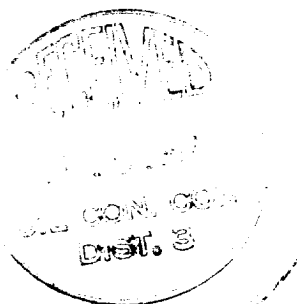
1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Dry hole		5. LEASE DESIGNATION AND SERIAL NO. NM 0557100	
2. NAME OF OPERATOR Charles M. Goad d/b/a Gola Oil Co.		6. INDIAN, ALLOTTEE OR TRIBE NAME Federal	
3. ADDRESS OF OPERATOR 11900 Morrow NE, Albuquerque, N. Mex. 87112		7. UNIT AGREEMENT NAME None	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1550 FWL, 1850 FNL, Sec. 4 T17N-R3W		8. FARM OR LEASE NAME Charles M. Goad	
14. PERMIT NO.		9. WELL NO. #2 Gola	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6417 GR		10. FIELD AND POOL OR WILDCAT San Luis Mesa Verde	
		11. SEC. T, R, M. OR BLM. AND SURVEY OR LEASE Sec. 4, T17N-R3W	
		12. COUNTY OR PARISH Sandoval	
		13. STATE N.M.	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☒	SHOOTING OR ACIDIZING ☐	ABANDONMENT ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	
(Other) ☐		(NOTE: Report results of multiple completion or 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.)*

It is our intention to abandon well, by plugging & setting surface marker. Work has already begun. We shall set a surface plug of sacks of cement.



RECEIVED
SEP 14 1967
U. S. GEOLOGICAL SURVEY
ALBUQUERQUE, N. M.

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

SIGNED Charles M. Goad TITLE Operator DATE 9-12-67

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0557100

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Federal

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

Charles M. Goad

9. WELL NO.

#2 Gola

10. FIELD AND POOL OR WHPCAT

San Luis Pasa Verde Pool

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

12. COUNTY OR PARISH

Sandoval

13. STATE

N.M.

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Dry hole

2. NAME OF OPERATOR
Charles M. Goad d/b/a Gola Oil Co.

3. ADDRESS OF OPERATOR
11900 Morrow NE, Albuquerque, New Mexico 87112

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface 1550 PWL, 1850 PNL, Sec. 4 T17N-R3W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6417 GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☒

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

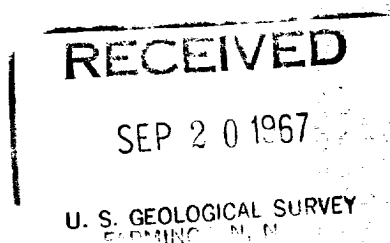
ALTERING CASING ☐

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.)*

Made a cement plug in the 4" ID casing about 15 ft. down from the top, with cement. When plug had hardened we filled the rest of the casing with cement & inserted a 2 1/2" OD tubing 7' down & 4' above the ground & filled the marker with cement. Marker contains all the proper markings. Location has been cleaned up & is ready for inspection. Release of drilling bond is hereby requested.



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

SIGNED

Charles M. Goad

TITLE

Operator

DATE

9-18-67

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Instructions

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