

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse 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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <u>WILDCAT</u>		5. LEASE DESIGNATION AND SERIAL NO. <u>NM-11928</u>	
2. NAME OF OPERATOR <u>COLEMAN OIL & GAS, INC.</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR <u>DRAWER 3337 FARMINGTON, NEW MEXICO 87401</u>		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 <u>1570' FSL, 810' FWL</u>		8. FARM OR LEASE NAME <u>BOC</u>	
14. PERMIT NO.		9. WELL NO. <u>1</u>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>7677 GR.</u>		10. FIELD AND POOL, OR WILDCAT <u>WILDCAT</u>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>SEC 10 T22N R1W</u>	
		12. COUNTY OR PARISH <u>SANDOVAL</u>	
		13. STATE <u>N.M.</u>	

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.)*

1-21-81 MOVE IN COMPLETION RIG. SET BAKER RETRIEVABLE BRIDGE PLUG @ 2180'.
PRESSURE TESTED CASING AND BRIDGE PLUG TO 2000 PSIG FOR 15 MINUTES,
HELD OK. PERF. 2120 - 2128' w/ 2 SPF.

1-22-81 SWAB TESTED; DRY, NO GAS, NO OIL.

1-23-81 ACIDIZED WITH 1000 GAL 15% HCL @ 1000 PSIG. SWAB TESTED TO PIT.
NO GAS, NO OIL. SWAB DRY.

1-24-81 SWAB TESTED DRY. RETRIEVED BRIDGE PREPARE TO P & A

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

SIGNED

R. D. SIMMONS

TITLE AGENT

DATE 1-28-81

(This space for approval or State office use)

ACCEPTED FOR RECORD

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

FARMINGTON DISTRICT

BY

NMOCC

*See Instructions on Reverse Side