

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. LEASE DESIGNATION AND SERIAL NO. NM-13948-A
2. NAME OF OPERATOR Rijan Oil Company, Inc.		7. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A
3. ADDRESS OF OPERATOR 20 First Plaza, Suite 402, Albuquerque, NM 87102		7. UNIT AGREEMENT NAME N/A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FSL & 990' FWL		8. FARM OR LEASE NAME Rijan Oil Company, Inc.
14. PERMIT NO.		9. WELL NO. Federal 2-27
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6782' GR		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T19N, R3W, NMPM
		12. COUNTY OR PARISH Sandoval
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Start drilling operations	xx

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(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.) *

WOC

Starting drilling operations. Moved in Stewart Brothers rig and spudded 12 1/2" hole at 2:00 P.M., June 30, 1981. Mr. Bill Blachurd with the U.S.G.S. inspected location during operations. Drilled 222', set 6 jts. 8 5/8" 32# csg. w/Texas Pattern Guideshoe. T.E. 221'. Set @221' (ground level). Cemented w/125 sxs. w/3% CaCl₂. POB @4:45 A.M. July 1, 1981. Cement circulated. Left 30' of cement in csg. After 8 hrs., tested csg. w/475 psi for 30 minutes. No pressure drop. WOC.



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

SIGNED

Morris B. Jones

TITLE

Engineer

DATE

7/1/81

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

JUL 08 1981

*See Instructions on Reverse Side

NMOC

BY

Dean Elliott
ARMINGTON DISTRICT

FD-203
(May 1963)

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DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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verse side)

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SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

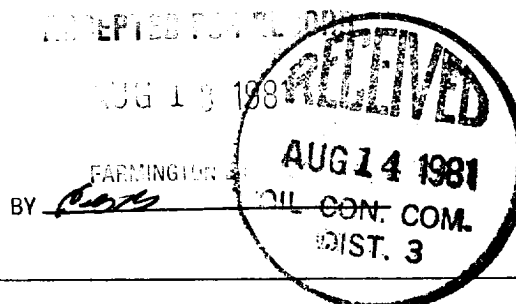
SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>drilling operations</u> <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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Rijan Oil Company has a signed drilling contract with Four Corners Drilling Company, Farmington, New Mexico, to drill the Federal 2-27 well. Rig No. 2 will drill the well to an approximate depth of 5300'. Drilling will commence in about 30 days or after completion of their present well. We will notify you when Rig No. 2 moves in.



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

SIGNED [Signature]

TITLE Geologist

DATE August 11, 1981

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

NMOCC