16.

5 USGS Durango 1 OCC Aztec 1 HLB 1 Davis

Form 9-331 (May 1963)

UNITED STATES

SUBMIT IN TRIPLICATE*

Other instructions on reverse side)

RIPLICATE*

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-03595

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

GEO	LOGI	CAL	SU	RVE	Y

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.)	
l.	7. UNIT AGREEMENT NAME
OIL GAS WELL X WELL OTHER	Escrito Gallup
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
BCO. Inc.	Escrito Gallup Unit
3. ADDRESS OF OPERATOR	9. WELL NO.
P. O. Box 669 Santa Fe, New Mexico 87501	12 (Formerly Judy 2)
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)	10. FIELD AND POOL, OR WILDCAT
At surface	Escrito Gallup
	11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA
1650 FSL 1980 FWL Sec 17 T24N R7W NMPM	
	17-24N-7W NMPM
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
GL 7203	Rio Arriba N.M.

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

SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: REPAIRING WELL WATER SHUT-OFF PULL OR ALTER CASING TEST WATER SHUT-OFF ALTERING CASING PRACTURE TREATMENT MULTIPLE COMPLETE FRACTURE TREAT ABANDONMENT* SHOOTING OR ACIDIZING SHOOT OR ACIDIZE ABANDON* CHANGE PLANS REPAIR WELL (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other)

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.)*

10-06-73 Acidized perforations through tubing with 500 gallons HCL 7 1/2% acid.
Breakdown, maximum and average pressure 2000#'s

10-07-73 Placed well back into production.



344 8 1673

8. I hereby certify that the foregoing is true and correct SIGNED Hany By	TITLE President	DATE November 06, 1973
/	TITLE TESTACHE	
(This space for Federal or State office use)	- Table 19	nate
APPROVED BY	TITLE	