Form 9-331 (May 1963)

UNITED STATES SUBMIT IN TRIPLICATE (Other instructions on rewerse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

DEPARTMENT	Of THE INTERNO	1 (10100 0100)		
GEOLOGICAL SURVEY			Contract No. 126	
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.)			6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
OIL GAS			7. UNIT AGREEMENT NAME	
WELL WELL OTHER 2. NAME OF OPERATOR			8. FARM OR LEASE NAME	
Cotton Petroleum Corporation			Apache	
3. ADDRESS OF OPERATOR		7 1 00000	9. WELL NO.	
717 17th Street, Suite 2200, Denver, Colorado 80202			#1]7 10. FIELD AND POOL, OR WILDCAT	
 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 			Lindrith Gallup	
660' FNL, 610' FEL			11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA	
			Sec. 12, T 24N, R 4W	
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)		r, GR, etc.)	N M P M 12. COUNTY OR PARISH 13. STATE	
	6915 GR		Rio Arriba New Mexico	
16. Check Appropr	ate Box To Indicate Nat	ture of Notice, Report, or	Other Data	
NOTICE OF INTENTION TO			QUENT REPORT OF:	
TEST WATER SHUT-OFF PULL OF	R ALTER CASING	WATER SHUT-OFF	X REPAIRING WELL	
7251 1122 122 122	LE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE ABANDO	N*	SHOOTING OR ACIDIZING	ABANDONMENT*	
REPAIR WELL CHANGE	PLANS	(Other)	ts of multiple completion on Well	
(Other)		Completion or Recom	pletion Report and Log form.)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATION proposed work. If well is directionally onent to this work.) *	s (Clearly state an pertinent c rilled, give subsurface location	as and measured and true verti	cal depths for all markers and zones perti-	
3-21-79	Spud well			
3-22-79			5 24# casing. Set at Cement circulated.	
4-9-79		239 jts of 4-1/2" 1 7662'. Cemented a	ong string 11.6# & 10.5# s follows:	
	Stage One:	600 sacks 50-50 p and 6-1/4# gilson	oz, 10% gel, 6# salt ite.	
	Stage Two:	and 12-1/2# gilso	oz, 10% gel, 12# salt onite. ooz, 2% gel. DV tool	

18. I hereby certify that the foregoing is true and correct	TITLE Division Production Mgr.	DATE 5=11-79	
(This space for Federal or State office use)			1
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE	