

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 43-E1424.

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 <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Contract 116
2. NAME OF OPERATOR Consolidated Oil & Gas Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Tribal
3. ADDRESS OF OPERATOR P.O. Box 2038, Farmington, New Mexico		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 790' FNL and 1850' FWL of Section 16, Township 26 North, Range 3 West, NMPM.		8. FARM OR LEASE NAME Apache
14. PERMIT NO.		9. WELL NO. 2-16
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 7031		10. FIELD AND POOL, OR WILDCAT Pictured Cliff & Mesaverde
		11. SEC., T., R., E., OR BLK. AND SURVEY OR AREA Sec. 16, Twn 26 North, Range 3 West, NMPM.
		12. COUNTY OR PARISH Rio Arriba
		13. STATE New Mexico

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) <input type="checkbox"/>	

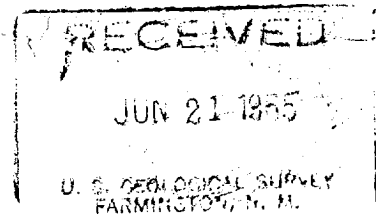
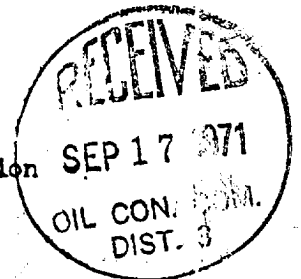
SUBSEQUENT REPORT OF:

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 checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)

Place 25 sacks regular cement across Mesaverde at 5856 - 5958'.
Place 20 sacks cement slurry across Pictured Cliff at 3694'. Put
35 sack cement plug at 7" shot stub 1537'. Put 35 sacks at 9 5/8"
shoe 308'. Put 10 sacks in and around Marker at top of 9 5/8".
Welded in and erected appropriate marker. Cleaned and leveled location
as required.



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

SIGNED Clyde Phillips

TITLE Production Foreman

DATE 6-16-65

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE APPROVED

JUL 20 1965

JOHN L. WARD
ACTING DISTRICT

*See Instructions on Reverse Side