Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.: SF-079035-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

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.)

7. UNIT AGREEMENT NAME:

1. OIL WELL [ ] GAS WELL [X] OTHER

8. FARM OR LEASE NAME: Breech A

2. NAME OF OPERATOR: Caulkins Oil Company

9. WELL NO.: 679

3. ADDRESS OF OPERATOR: P.O. Box 780, Farmington, New Mexico

10. FIELD AND POOL, OR WILDCAT: Otero-Chacra, BLANCO-MV

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface

1980' F S/L and 1980' F E/L

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Section 9 26N - 6W

12. COUNTY OR PARISH: Rio Arriba

13. STATE: New Mexic

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 6498' Gr.

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Plug Back			[X]
(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.)*

8-7-79 Plug back 6692 to 6444 with 45 sacks Neat cement.

Spotted 9.2# Gel Based Mud 6444 to 5660.

Spotted cement plug 5660 to 5420.

PBTD now 5420.

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

SIGNED [signature] TITLE Superintendent DATE 8-9-79

(This space for Federal or State office use)

APPROVED BY TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side