

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other ☐  
2. NAME OF OPERATOR  
Caulkins Oil Company  
3. ADDRESS OF OPERATOR  
P.O. Box 780, Farmington, New Mexico  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 860' F N/L and 1120' F W/L  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  
TEST WATER SHUT-OFF ☐ ☒  
FRACTURE TREAT ☐ ☐  
SHOOT OR ACIDIZE ☐ ☐  
REPAIR WELL ☐ ☐  
PULL OR ALTER CASING ☐ ☐  
MULTIPLE COMPLETE ☐ ☐  
CHANGE ZONES ☐ ☐  
ABANDON\* ☐ ☐  
(other) ☐ ☐

5. LEASE  
SF-079035-A  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Breech A  
9. WELL NO.  
125  
10. FIELD OR WILDCAT NAME  
South Blanco-PC, Otero-Chacra  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Section 8 26N 6W  
12. COUNTY OR PARISH  
Rio Arriba  
13. STATE  
New Mexico  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6570 Gr.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

7-15-79 Deepened well 3007' to 3980'. Ran 4½" New 10.5# J-55 casing to 3980' and cemented with 170 sacks Neat cement.  
Cement circulated to surface.  
Plug down 3:00 PM 7-14-79.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Charles E. Vignone TITLE Superintendent DATE 7-17-79

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: