

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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.)

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Injection</u></p> <p>2. NAME OF OPERATOR <u>Caulkins Oil Company</u></p> <p>3. ADDRESS OF OPERATOR <u>Post Office Box 780, Farmington, New Mexico</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>660 from North and 1980 from West</u></p> <p>14. PERMIT NO.</p>	<p>5. LEASE DESIGNATION AND SERIAL NO. <u>S F 079035-A</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <u>Breech A-</u></p> <p>9. WELL NO. <u>134</u></p> <p>10. FIELD AND POOL, OR WELDCAT <u>South Blanco Tocito</u></p> <p>11. SEC., T., R., MT. OR BLK. AND SURVEY OR ARMA <u>Sec. 10, 26N, 6W</u></p> <p>12. COUNTY OR PARISH <u>Rio Arriba</u></p> <p>13. STATE <u>New Mexico</u></p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>6550 DF</u></p>	

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

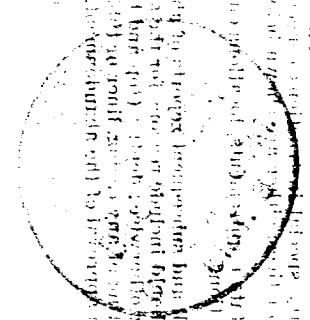
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Other) New Mexico OCC memo 9-13-74

(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 and 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.)*

Future plans possible Chacra or Mesa Verde recompletion.. This work should be done during 1975 if completion equipment can be purchased.



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

SIGNED Charles E. Weyer TITLE Superintendent DATE 11-29-74

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: