

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse 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.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Caulkins Oil Company

3. ADDRESS OF OPERATOR

Post Office Box 780, Farmington, New Mexico

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

790 from the South and 820 from the West.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6623 Gr.

5. LEASE DESIGNATION AND SERIAL NO.

SF 079304

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Sanchez

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

South Blanco-Otero-Chacra

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 25 26N - 6W

12. COUNTY OR PARISH 13. STATE

Rio Arriba

New Mexico

18.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐  
☐  
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PULL OR ALTER CASING

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☐  
☐  
☐  
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☒  
☐  
☐  
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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☐  
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(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.)\*

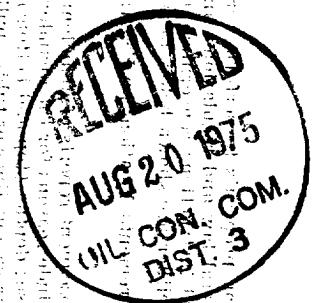
Spud well 8:00 AM. 8-13-75.

Drilled to TD 155' and cemented 8 5/8" 24# casing @ 155' with 125 sacks 2% CaCl.  
Cement circulated.

Plug down 5:45 PM. 8-13-75.

Tested 8 5/8" surface casing with 500# 8-14-75.

No decrease in pressure.



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

SIGNED

*Charles E. Egan*

TITLE

Superintendent

DATE

8-15-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side