Form, 9-331 (May 1963)

UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE*
(Other instructions on re-

Form approved.
Budget Bureau No. 42-R1424,

DEPARTI	5. LEASE DESIGNATION AND SERIAL NO NM 03551	
SUNDRY NOT (Do not use this form for propose Use "APPLICA"	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
OIL CAS XX OTHER	7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR	8. FARM OR LEASE NAME	
Caulkins Oil Compa	Breech E.	
3. ADDRESS OF OPERATOR	9. WELL NO.	
Post Office Box 78	51	
4. LOCATION OF WELL (Report location of See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT SouthBlanco-Chacra Undes	
1190 from the North	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
		Section 4 26N 6W
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	6540 Ground	Rio Arriba New Mexico

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 X REPAIRING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE	 FRACTURE TREATMENT ALTERING CASING	
SHOOT OR ACIDIZE		ABANDON*	SHOOTING OR ACIDIZING ABANDONMENT*	I
REPAIR WELL		CHANGE PLANS	(Other)	İ
(Other)			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	١

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 at 5:30 PM 6-20-76.

Drilled 12 1/4" hole to 132'. Ran XX 8 5/8" 24# J-55 casing to 132' then cemented with 150 sacks. 2% CaCl. Plug down 10:30 PM 6-20-76. Cement circulated to surface.

6-21-76 - Tested surface casing with 700# for 30 min. No Decrease.