

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Contract #96

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla H

9. WELL NO.

5-A

10. FIELD AND POOL, OR WILDCAT

Blanco Mesa Verde

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

Sec. 11, T-26-N, R-3-W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

1.

OIL ☐ GAS ☒
WELL WELL OTHER

2. NAME OF OPERATOR

Mobil Oil Corporation

3. ADDRESS OF OPERATOR

Suite 800, Three Greenway Plaza East, Houston, TX 77046

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

At surface

1190' FNL & 790' FWL of Sec. 11, T-26-N, R-3-W

14. PERMIT NO.

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

7056

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

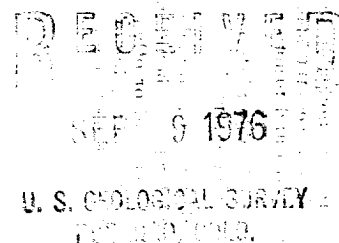
PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Casing Cement to Test Job ☒(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

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.)*

Ran 188 jts 4½ 10.5# csg w/shoe @ 600 FC @ 5967 & DV Tool @ 3844, circ 1½ hrs, BJ cmt 1st stage w/465x Lt Wt + 5# gilsonite + ¼ flocele/x + 300x B Neat + ¼# flocele PD 3:45 AM 8/2/76, cmt circ, 2nd stage BJ cmt thru DV Tool @ 3844 w/868x Lt Wt + 5# tilsonite + ¼# flocele/x, tailed in w/100x B Neat + ¼# flocele/x, PD 11 AM 8/2/76, circ 150x, NU, clean pits, WOC 18 Hrs Tested csg at 800# for 20 mi OK.



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

SIGNED

TITLE Authorized Agent

DATE 8-27-76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side