

USGS, Durango, Colo.

1-B

1-F

Form 9-331  
(May 1963)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER                                                                         | 5. LEASE DESIGNATION AND SERIAL NO.<br>SF #079151                 |
| 2. NAME OF OPERATOR<br>Bolin Oil Company                                                                                                                                                 | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                              |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 400, Aztec, New Mexico 87410                                                                                                                         | 7. UNIT AGREEMENT NAME                                            |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>1175' FNL / 1020' FEL (Unit A) Sec. 3 T26N R7W | 8. FARM OR LEASE NAME<br>Candado                                  |
| 14. PERMIT NO.                                                                                                                                                                           | 9. WELL NO.<br>20                                                 |
| 15. ELEVATIONS (Show whether B.L., G.L., or, etc.)<br>6573' GL                                                                                                                           | 10. FIELD AND POOL, OR WILDCAT<br>Blanco Mesaverde                |
|                                                                                                                                                                                          | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 3-26N-7W |
|                                                                                                                                                                                          | 12. COUNTY OR PARISH<br>Rio Arriba                                |
|                                                                                                                                                                                          | 13. STATE<br>N. Mex.                                              |

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

NOTICE OF INTENTION TO:

|                     |                          |                      |                          |
|---------------------|--------------------------|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | FULL OR ALTER CASING | <input type="checkbox"/> |
| FRACTURE TREAT      | <input type="checkbox"/> | MULTIPLE COMPLETE    | <input type="checkbox"/> |
| SHOOT OR ACIDIZE    | <input type="checkbox"/> | ABANDON*             | <input type="checkbox"/> |
| REPAIR WELL         | <input type="checkbox"/> | CHANGE PLANS         | <input type="checkbox"/> |
| (Other)             | <input type="checkbox"/> |                      |                          |

SUBSEQUENT REPORT OF:

|                       |                                     |                 |                          |
|-----------------------|-------------------------------------|-----------------|--------------------------|
| WATER SHUT-OFF        | <input type="checkbox"/>            | REPAIRING WELL  | <input type="checkbox"/> |
| FRACTURE TREATMENT    | <input type="checkbox"/>            | ALTERING CASING | <input type="checkbox"/> |
| SHOOTING OR ACIDIZING | <input type="checkbox"/>            | ABANDONMENT*    | <input type="checkbox"/> |
| (Other) Casing record | <input checked="" type="checkbox"/> |                 |                          |

(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.) \*

Report:

9/10/77

Ran 5 1/2" 15.5# new csg. set @ 5303' KB. Two stage tool @ 3983'.  
Centralizers & basket utilized. Cemented w/900 sxs. circulated to  
surface.

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

SIGNED *J. P. Crum Jr.*

TITLE agent

DATE 9/12/77

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE SEP 14 1977

DATE

\*See Instructions on Reverse Side