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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-291-26

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" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Caulkins Oil Company	8. Farm or Lease Name State "A"
3. Address of Operator P.O. Box 780 Farmington, New Mexico 87499	9. Well No. 113-E
4. Location of Well UNIT LETTER P, 1110 FEET FROM THE South LINE AND 950 FEET FROM THE East LINE, SECTION 2 TOWNSHIP 26 North RANGE 6 West N.M.P.M.	10. Field and Pool, or Wildcat Basin Dakota - Balnco MV.
15. Elevation (Show whether DF, RT, GR, etc.) 6646 GR	12. County Rio Arriba

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Commingled Mesa Verde and Dakota Zones

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

By Order # R-7980

9-24-85 Pulled 1 1/4" Tubing - salvaged same.

Pulled 2 1/16" Tubing with Packer.

Re-dressed Packer then re-ran 2 1/16" Tubing and Packer with Reverse Flow Check Valve immediately above Packer.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Charles Chavez TITLE Superintendent DATE 10-2-85

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

OCT 6 1985

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: