form 3160-5 fovember 1983) formerly 9-331)  DEPARTMENT OF THE INTERBUREAU OF LAND MANAGEMENT		Form approved. Budget Bureau I Expires August 5. LABE DESIGNATION NM 03381	31, 1985
SUNDRY NOTICES AND REPORTS  (Do not use this form for proposals to drill or to deepen or pluse "APPLICATION FOR PERMIT—" for such	ON WELLS g back to a different reservoir. a proposals.)	6. IP INDIAN, ALLOTTEE	OR TRIBE NAME
OIL GAS X OTHER		7. UNIT AGREEMENT NA	M E
2. NAME OF OPERATOR		8. FARM OR LEASE NAME	
Caulkins Oil Company		Breech "B"	
3. ADDRESS OF OPERATOR		9. WELL NO.	•
P.O. Box 780 Farmington, New Mexico 87499		172-E	
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface		Basin Dakota Blanco  11. SEC., T., B., M., OR BLE. AND  SURVEY OF AREA  80 RF DEC. T. D. T. D.	
890' F/S and 990' F/W	APP NUMBER	Section 7, 26	N 6W
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6496 GR		12. COUNTY OR PARISH	13. STATE
		Rio Arriba	New Mexico
16. Check Appropriate Box To Indicate	Nature of Notice, Report, or C	Other Data	
NOTICE OF INTENTION TO:		UANT REPORT OF:	
TEST WATER SHUT-OFF PULL OR ALTER CASING MULTIPLE COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT	REPAIRING V	
SHOOT OR ACIDIZE ABANDON®	SHOOTING OR ACIDIZING	ABANDONMEI	NT*
DEPAIR WELL CHANGE PLANS	(Other)		

(Other) Commingling Application (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.)

It is proposed to down hole commingle Mesa Verde and Dakota Zones.

This notice to advise BLM that hearing with State of New Mexico has been set asking for approval.

BLM approval will be obtained prior to any work being done on well.



	Account of the contract of the	
18. I hereby certify that the foregoing is true and correct	ACCEPTED FOR RECORD	
SIENED Charles E. Organite Superintendent	DATE 4-5-85	
(The space for Federal or State office use)  APPROVED BY TITLE	APR 1 0 1985	
CONDUTIONS OF APPROVAL, IF ANY:	-5m- / LI - MOVES PARSIMOND I PENSIONE AREA	
*See Instructions on Reverse Side		