

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget (Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 080213

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

7. UNIT AGREEMENT NAME

Rincon Unit

8. FARM OR LEASE NAME

Rincon Unit

9. WELL NO.

200

10. FIELD AND POOL, OR WILDCAT

Undes. Chacra

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

Sec. 33, T-27-N, R-7-W  
NMPM

12. COUNTY OR PARISH 13. STATE

Rio Arriba

NM

14. PERMIT NO.

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

6750'GL

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

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other) \_\_\_\_\_

(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.)\*

11-21-73 Spudded well. Drilled surface hole.

11-26-73 Ran 3 joints 8 5/8", 24#, K-55 surface casing, 123' set at 123'GL.  
Cemented with 112 cu. ft. cement, circulated to surface. WOC 12 hours.

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

SIGNED

*J. J. Delo*

TITLE

Drilling Clerk

DATE

December 3, 1973

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

