DEPARTMENT OF THE INTERIOR verse side)  GEOLOGICAL SURVEY  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.  OLL WELL A OTHER  CAULKINS OIL COMPANY  ADDRESS OF OPERATOR  Post Office Box 780, Farmington, Naw Mexico  LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  91401 from North and 18501 from West of Sec. 35 27N 6W  15. ELEVATIONS (Show whether DF, RT, CR, etc.)  16. IF INDIAN, ALLOTTEE OR TRISS NAME  7. UNIT AGREEMENT NAME  8. FARM OR LEASE NAME  10. FIELD AND FOOL, OR WILDCAT—  South Blanco  11. SEC., T., 2, M., OR BLE. AND  SULVET OR AREA  Sec. 35 27N 6W  14. PERMIT NO.  15. ELEVATIONS (Show whether DF, RT, CR, etc.)  6596 DF  Rio Arriba New Mexi		/
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.    Out	(May 1963) UNITED STATES SUBMIT IN TRIPLICATE*	Budget Bureau No. 42-R1424.
(Other water state of the proposal to the first of deepen or plus facts to a different reservoir.    Coll	GEOLOGICAL SURVEY	N 0351/7
(Do not use this form for proposals to drill or to despen or plus hack to a different reservoir.    One	SLINDRY NOTICES AND REPORTS ON WELLS	6. IF INDIAN; ALLOTTEE OR TRIBE NAME
Other Countries of Other Countries of Notice of Institution to 15. Elevation 70.  10. Permit No.   15. Elevation 70.  11. Permit No.   15. Elevation 70.  12. Countries of water (Report location clearly and in accordance with any State requirements.* At surface.  91:0' from North and 1850' from West of Sec. 35 27N 677  14. Permit No.   15. Elevations (Show whether Dr. Rf. Ch. etc.)   12. Countries of Notice of Institution 70.  15. Elevations of Notice of Institution 70.  16. Check Appropriate Box To Indicate Notice of Notice, Report, or Other Data Submandary Report of Institution 70.  17. Describe Tenarism 18. Permit Short of Notice of Notice, Report, or Other Data Submandary Report of Notice of Institution 70.  17. Describe Tenarism 18. Permit Short of Notice of Notice, Report, or Other Data Submandary Report of Notice of No	(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.)	
Caulkins Oil Company  3. Address of Defice Box 780, Fermington, New Merico  Post Office Box 780, Fermington, New Merico  10. Field and pool, or wilder.  10. Field and pool, or wilder.  South Hanco  11. Field and pool, or wilder.  South Hanco  12. Count or Parties  13. Exercise South Hanco  14. Fermir No.  15. Elevations (Show whether Dr. Rt. or. etc.)  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTERNEOUS YO:  TERM WATER SHUT-OFF  PRACTURE TRANT  SHOOT ON ACTORISE  REPAIRING VIEL  ALTERISM CARDING  MULTIPLE COMPLETE  REPAIRING ALBIER  SHOOT ON ACTORISM  SHOOT ON ACTORISM ON THE CARD OFTEN THOSE FLANS  (Cheer)  17. DESCRIBE INDOORS OR COMPLETED OFTEN THOSE FLANS  CHANGE FLANS  CHANGE FLANS  (Cheer)  18. EXERCISE TREATMENT  SHOOT ON ACTORISM  SHOOT ON ACTORISM  SHOOT ON ACTORISM  SHOOT ON ACTORISM ON ACTORISM  SHOOT ON ACTORISM  SHOOT ON ACTORISM  SHOOT ON ACTORISM  SHOOT ON ACTORISM ON ACTORISM  SHOOT ON ACTORISM ON ACTORISM  SHOOT ON ACT	OIL GAS OTHER	7. UNIT AGREBMENT NAME
POST Office Box 780, Farmington, New Mexico  10. From North and 1850! from West of Sec. 35 27N 6W  14. Permit No.  15. Elevations of Sec. 35 27N 6W  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENDENTS INTENDENTS:  Test water short-off Public on Alter Casino  NOTICE OF INTENDENTS INTENDENTS:  Test water short-off Public on Alter Casino  Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENDENTS INTENDENTS:  Test water short-off Public on Alter Casino  NOTICE OF INTENDENTS INTENDENTS:  Test water short-off Public on Alter Casino  NOTICE OF INTENDENTS INTENDENTS:  Test water short-off Public on Alter Casino  NOTICE OF INTENDENTS INTENDENTS  Test water short-off Intended Output Conference on Completion on West Completion of Recompletion Report and Log form.)  (Other)  (Other)  (Other)  Spudded in at 8:30 PM 8-11-714. Drilled to TD 130'. Ran 8 5/8" OD EN casing to 130' and cemented with 100 sacks. Cement circulated. Plug down 5:30 AM 9-15-714.  Tested surface casing with 500% for 30 minutes. No decrease in pressure.		8. FARM OR LEASE NAME
Post Office Box 780, Farmington, Now Mexico  10  10  10  10  10  11  10  11  11  1		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also paper 17 below.)  9 10! from North and 1850! from West of Sec. 35 27N 6W  11. SEC. 7. 7. 4 0.8 BLE. AND  Sec. 35 27N 6W  12. COUNT OR PARISH 13. STATE  Rio Arriba New Mexi  14. PERMIT NO.  15. BLEVATIONS (Show whether DF. RT, OR, etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTERTION TO:  TEST WATER SHUT-OFF  PULL OR ALTER CASINO  MULTIPLE COMPLETE  SUBBROUGHT REPORT OF:  WATER SHUT-OFF  PRACTURE TREATMENT  SHOOTING OR ACIDIZED  SUBBROUGHT REPORT OF:  WATER SHUT-OFF  PRACTURE TREATMENT  SHOOTING OR ACIDIZED  SHAPPING CASHING  ANANOON.*  (Other)  17. DESCRIPT CHAPGE PLANS  (Other)  COMPLETE OF PRATICOLUMN SHOULD ANANOON SHOULD SHAPPE OF PRATICOLUMN SHOULD SHAPPE OF SHAP		9. WELL NO.
940' from North and 1850' from West of Sec. 35 27N 6W  11. SEC. 35 27N 6W  12. COUNTY OF PARISH 13. STATE RIO ATTIDA  NOTICE OF INTENTION 30  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION 30:  TEST WATER SHUT-OFF PRACTURE TREAT SHOOT ON ACIDIZE  REPAIRING WALL  CHANGE PLANS	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)	
910' from North and 1850' from West of Sec. 35 27N 6W  Sec. 35 27N 6W  14. PERMIT NO.  15. ELEVATIONS (Show whether Dr. RT. CR. etc.)  16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Notice of Interview To:  TEST WATER SHUP-OFF FRACTURE TREATMENT ARABODO* CHANGE PLANS  CHANGE PLANS  (Other)  17. DESCRIBE PROPOSED OR COMPLETE OF REALISM OF SUBMERGED OF REALISM OF SUBMERGED OR ACCOUNTING ARABODOS ACCOUNTING OR ACCOUNTING ARABODOS ACCOUNTING ARABODOS ACCOUNTING ARABODOS ACCOUNTING OR ACCOUNTING ARABODOS ACCOUNTING OR ACCOUNTING ARABODOS ACCOUNTING OR ACCOUNTING ARABODOS ACCOUNTING OR ACCOUNTING ARABODOSED OR COMPLETED OFREATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting are next this work.)  Spudded in at 8:30 PM 8-11-71. Drilled to TD 130'. Ran 8 5/8" OD EN casing to 130' and comented with 100 sacks. Coment circulated. Plug down 5:30 AM 9-15-71.  Tested surface casing with 500% for 30 minutes. No decrease in pressure.	At surface	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TRAINT SHOOT OR ACTIVE COMPLETE COMPLETE REPAIR WELL (Other)  CHANGE PLANS (Clearly state all pertinent details, and dive pertinent sets, include work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and sones pertinent of with 100 sacks. Cement circulated. Plug down 5:30 AM 9-15-74.  Tested surface casing with 500% for 30 mimutes. No decrease in pressure.	940! from North and 1850! from West of Soc. of 27% (m	SURVEY OR AREA
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Notice of Intention to:  Test water shut-off Pull or alter Casino Multiple Complete SHOOT on acticize Repair well Cherry  17. Describe induced of Complete operations (Clearly state all pertioent details, and give pertinent dates, including estimated date of starting any pertion to this work).*  Spudded in at 8:30 PM 8-14-74. Drilled to TD 130'. Ran 8 5/8" OD EW casing to 130' and comented with 100 sacks. Cement circulated. Plug down 5:30 AM 9-15-74.  Tested surface casing with 500% for 30 minutes. No decrease in pressure.	741 THE HOLD WAR TONG TIOM WEST OF DEG. 32 5/14 OM	Sec. 35 27N 6W
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  Notice of intention to:  Subsequent report of:  TEST WATER SHUT-OFF FRACTURE TREATMENT SHOOT OR ACTOILE REPAIR WELL (Other)  17. Descense indrodes or completed of grantons (Clearly state all pertinent details, and give pertinent dates including estimated date of starting any report work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and sones pertinent of this work.)  Spudded in at 8:30 PM 8-14-74. Drilled to TD 130'. Ran 8 5/8" OD ET casing to 130' and cemented with 100 sacks. Cement circulated. Plug down 5:30 AM 9-15-74.  Tested surface casing with 500# for 30 minutes. No decrease in pressure.  SEP 2 7.1974 OIL CON. COM.	14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, etc.)	12. COUNTY OR PARISH 13. STATE
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REPAIR WELL (Other) (Other) (Other) (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 sones pertinent to this work.)  Spudded in at 8:30 PM 8-14-74. Drilled to TD 130. Ran 8 5/8" OD EN casing to 130. and cemented with 100 sacks. Cement circulated. Plug down 5:30 AM 9-15-74.  Tested surface casing with 500% for 30 minutes. No decrease in pressure.  SEP 2 7 1974 OIL CON. COM.		·
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8. I hereby certify that the foregoing is true and correct		

\*See Instructions on Reverse Side

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_\_\_ CONDITIONS OF APPROVAL, IF ANY:

DATE

DATE