Form 9-331
(Mar 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

SF #079107

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

1.

OIL WELL ☐	GAS WELL ☒	OTHER

8. FARM OR LEASE NAME

Candado

2. NAME OF OPERATOR

Bolin Oil Company

9. WELL NO.

18

3. ADDRESS OF OPERATOR

P. O. Box 400, Aztec, New Mexico   87410

10. FIELD AND POOL, OR WILDCAT

So.Blanco PC/Otero Chacra

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1800' FSL / 790' FEL

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

Sec. 25-T26N-R7W

14. PERMIT NO.

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

6489' GR

12. COUNTY OR PARISH **Rio Arriba**

13. STATE **N.M.**

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) **Change in well number** ☒	
(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.) *

Report:

Well formerly identified as Candado #16-A now deignated as #18.

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

SIGNED _____   TITLE _____**agent**_____   DATE **1/25/77**

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side