

UNITED STATES
DEPARTMENT OF THE INTERIOR
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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR

Caulkins Oil Company

3. ADDRESS OF OPERATOR

P.O. Box 780 Farmington, New Mexico

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1520' F/S & 1070' F/E

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON ☐

(other) ☐

SUBSEQUENT REPORT OF:

☒

☐

☐

☐

☐

☐

☐

☐

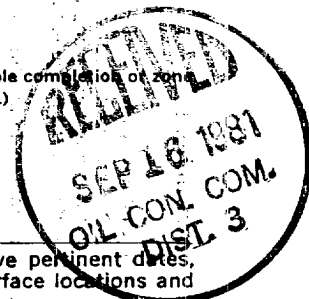
☐

RECEIVED

SEP 16 1981

U.S. GEOLOGICAL SURVEY
FARMINGTON, N.M.

(NOTE: Report results of multiple completion of zone charge on Form 9-330.)



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.)*

8-23-81 Spud at 10:00 PM.

Drilled 13 3/4" hole to 309'.

Ran 9 5/8" 32.30# H-40 casing to 309' and cemented with 250 sacks Neat cement, 2% CaCl.

Plug down 10:15 AM 8-24-81.

Cement circulated to surface.

8-26-81 Cement set 24 hours, then tested 9 5/8" casing with 600# for 30 minutes. No decrease in pressure.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Charles A. Dugan TITLE Superintendent DATE August 28, 1981

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

BY 3mm

NMOCC