orm 9-331 May 1963)	UNITED STATES SUBMIT IN TRI	
	DEPARTMENT OF THE INTERIOR (Other Instruction of the Interior	14-20-603-2085
	GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use	UNDRY NOTICES AND REPORTS ON WELLS this form for proposals to drill or to deepen or plug back to a different reserv Use "APPLICATION FOR PERMIT—" for such proposals.)	
OIL KYT GAS	S 📄	7. UNIT AGREEMENT NAME
WE'LL WE		S. FARM OR LEASE NAME
	roleum Corporation	Old Trading Post
3. ADDRESS OF OPER		9. WELL NO.
501 Airpo	ort Drive, Farmington, New Mexico 8740 L. (Report location clearly and in accordance with any State requirements.*	1 10. FIELD AND POOL, OR WILDCAT
See also space 17 At surface	7 below.)	Bisti - Lower Gallup
At aditace		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
		SEC. 10, T26N, R14W
	, 1850' FWL, SEC. 10, T26N, R14W	NMPM 12. COUNTY OR PARISH 13. STATE
14. PERMIT NO.	6125' GL, 6137' KB	San Juan N.M.
1.6.	Check Appropriate Box To Indicate Nature of Notice, Re	SUBSEQUENT REPORT OF:
	NOTICE OF INTENTION TO:	
TEST WATER SH	TRICOURE TREAT	V
FRACTURE TREAT	T STROUTING OF AC	<u> </u>
REPAIR WELL	CHANGE PLANS (Other)	the second multiple completion on Well
(Other)	Completion	port results of multiple completion on Well n or Recompletion Report and Log form.)
17. DESCRIBE PROPOS proposed work nent to this we	SED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pert k. If well is directionally drilled, give subsurface locations and measured and ork.) •	tinent dates, including estimated date of starting any true vertical depths for all markers and zones perti-
9-10-77	Pressure tested casing to 4000 psi for 500 gal. 15% HCl across interval 4190' interval 4930'-4940' with two shots pe into formation with 50 bbl. crude oil. Average pressure 1600 psi @ 5 BPM. IS psi.	-4940'. Perforated r foot. Displaced acid Maximum pressure 2000 psi
9-11-77	Sandfraced well with 32,000 lb. 20/40 sand in 30,200 gal. crude oil at press of 36 BPM.	sand and 2000 lb. 10/20 ure of 3000 psi and rate
	Carlo San Francisco	CONFIDENTIAL
18. I hereby certif	y that the foregoing is true and correct Area Manager	
SIGNED	TITLE Minerals Manag	gement Inc. DATE 9-12-77
(This space for	r Federal or State office(use)	