

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 078476

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.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

AAA Operating Company, Inc.

3. ADDRESS OF OPERATOR

Suite 3545 First International Bldg., Dallas, Tx 75270

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

At surface

1110' FSL & 990' FEL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal J

9. WELL NO.

#2

10. FIELD AND POOL, OR WILDCAT

Chacra

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

11-27N-8W

14. PERMIT NO.

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

6618 GR

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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.)\*

6-12-79

Ran 203' of 8 5/8" - cement top - surface  
Set with 175 sx Class B

6-18-79

Ran 4163' of 4 1/2" - cement top - surface  
Set with 385 sx Litepoz  
150 sx. Class B



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

SIGNED

*[Signature]*

TITLE

President

DATE 3/21/80

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

NMOCG

ACCEPTED FOR RECORD

DATE

MAR 27 1980

*ok [Signature]*

\*See Instructions on Reverse Side

BY *[Signature]*