AT TOTAL DEPTH:

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) NOTICE OF

## UNITED STATES DEPARTMENT OF THE INTERIOR

	Form Approved. Budget Bureau No. 42-R1424
	5 LEASE
NTERIOR	NM 0562 223
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
EY	6. IF INDIAN, PLEOTTEE OR TRIBE NAME
RTS ON WELLS	7. UNIT AGREEMENT NAME
	8. FARM OR LEASE NAME
	Frew Feneral
	9. WELL NO.
	1D
	10. FIELD OR WILDCAT NAME
	WAW FROITLAND-PRITUREACTIFF
, COLO 80201	11. SEC., T., R., M., OR BLK. AND SURVEY OR
CLEARLY. See space 17	AREA
	12. COUNTY OF PARISH! 13. STATE
,	
	SANJUAN NEW MEXICO
	14. API NO.
E NATURE OF NOTICE,	
	15. ELEVATIONS (SHOW DF, KDB, AND WD)
EQUENT REPORT OF:	60°-5 6°C
EQUENT REPORT OF:	·
H	
(NOTE:: Report results of multiple completion or zone change on Form 9–330.)	
H 55m x 2	
-	
<u>OWN</u> ER AND OPERA	ATOR
ODERATIONS (Classic state	all postinget despite and give pertinent dates
OPERATIONS (Clearly state all pertinent details, and give pertinent dates proposed work. If well is directionally drilled, give subsurface locations and markers and zones pertinent to this work.)*	
of well ownership from DCME PETROLEUM to	
	ignation of TEXACO INC. as
erator of this	well, effective February 1,

**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 gas well  $\boxtimes$ well other 2. NAME OF OPERATOR TEXACO INC. 3. ADDRESS OF OPERATOR P. O. BOX 2100; DENVER, COLO 80201 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1850 FNL , 1800 FWL AT TOP PROD. INTERVAL:

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

CHANGE

SUBSEQUENT REPORT OF:

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly sta including estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertine

This reports transfer of well owners TEXACO OILS INC.; and, also, the des the duly authorized operator of this 1984.

I hereby certify that the foregoing is true and correct

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

7120-14 TITLE Field Supt. DATE 3-2-8-4

(This space for Federal or State office use,

\_\_ TITLE \_ APPROVED BY CONDITIONS OF APPROVAL. IF ANY

PACCEPTED FOR RECORD

NMOGC(2) JNH CDF ARM JUL 2 2 1985

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA BY....