

Form 9-331
(May 1953)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-21424.
5. LEASE DESIGNATION AND SERIAL NO.

Sf-677317

SUNDRY NOTICES AND REPORTS ON WELLS

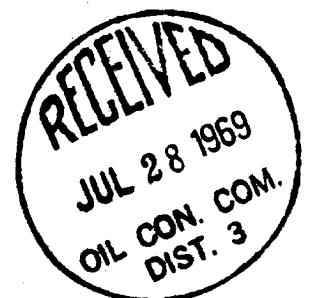
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Aztec Oil & Gas Company</i>	8. FARM OR LEASE NAME <i>Cooper</i>
3. ADDRESS OF OPERATOR <i>Drawer 570, Farmington, New Mexico</i>	9. WELL NO. <i>8</i>
4. LOCATION OF WELL (Indicate whether it is on the surface or in a cave, etc., and give the location of the well as shown on the map.) See also sketch in back of this form.	10. TIEED AND POOL, OR WILDCAT <i>Pictured Cliffs</i>
11. NAME OF WELL (Indicate whether it is on the surface or in a cave, etc., and give the location of the well as shown on the map.) <i>1650 FINE & 1650 FINE, Sec. 7-28N-11W</i>	12. COUNTY OR PARISH, STATE, TERRITORY, OR DISTRICT <i>San Juan New Mexico</i>

NAME OF OPERATOR		SUBSEQUENT REPORT OF:	
TIME WATER SHUT-IN	WELL ON OTHER CASING	WATER SHUT-IN	REPAIRING WELL
FRACTURE TREAT	MULTIPLE CEMENTING	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	GRANULAR*	SHOOTING OR ACIDIZING	ABANDONING WELL
REPAIR WELL	CHANGE PLANS	(Other)	<i>Speed Report</i>
(Other)		(Note: Report results of multiple completion or fracture completion or Recombination Report and Log Form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give azimuthal bearings and measured and true vertical depths for all markers and zones pertinent to this work.)

6-24-69 Moved on rotary. Ran 3 joints 8-5/8" 24# casing. Landed 110' cement w/60 em, class C, 25 cc. Pressure test casing to 500# - OK. Plug down 1:00 P.M. woc



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

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

SIGNED *Joe C. Adams* TITLE *District Superintendent* DATE *7-24-69*

(This space for Federal or State office use)

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

*See Instructions on Reverse Side