

(May 1968)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424

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.)

5. LEASE DESIGNATION AND SERIAL NO.

SF-080655

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hare

9. WELL NO.

#22-A

10. FIELD AND POOL, OR WILDCAT

Aztec PC/Blanco MV

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

Sec. 14, T29N, R10W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

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)

Casing Report

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

(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.)*

3-18-79 Set 66 joints (2597.21') of 7", 20#, K-55, 8 rd casing at 2590'. Cemented with 170 sacks of Class "B", 50/50 Poz with 6% gel followed by 50 sacks of Class "B" with 2% CaCl₂. Plug down at 10:45 PM, 3-18-79.

3-22-79 Set 58 joints (2456') of 4 1/2", 10.5#, K-55 casing from 2431' to 4886'. Cemented with 300 sacks of Class "B", 50/50 Poz with 6% gel, 1/4# cello flake per sack and .6% Halad 9. Plug down at 6:45 AM, 3-22-79.

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

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

SIGNED

TITLE District Production Manager

DATE 3-22-79

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

lymocl