

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(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. <u>SF 078115</u>
1. OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> WELL WELL		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR <u>Aztec Oil and Gas Company</u>		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR <u>Drawer 570</u>		8. FARM OR LEASE NAME <u>Alston</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>990 FSL & 1650 FWL, Sec. 35-31N-11W</u>		9. WELL NO. <u>1</u>
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT <u>Blanco Mesaverde</u>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>5776 DF</u>		11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA <u>Sec. 35-31N-11W</u>
12. COUNTY OR PARISH <u>San Juan</u>		13. STATE <u>New Mexico</u>

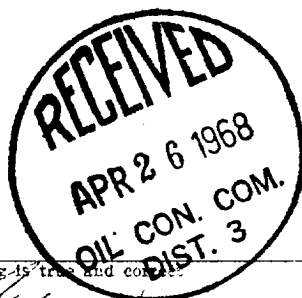
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(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.)*

Propose to:

Pull 2-3/8" tubing, squeeze off open hole and perforations
 Set whipstock approximately 4400', cut window in 7" casing.
 Drill through Point Lookout formation with gas
 Run 3 1/2" liner
 Perforate Cliffhouse and Point Lookout
 Sand-water frac
 Run 1 1/2" tubing
 Put back on production



RECEIVED

APR 25 1968

U. S. GEOLOGICAL SURVEY
MINING

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

SIGNED Jac C. Williams TITLE District Superintendent DATE 4-24-68

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: