

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.)

|   |  |  |  |
|---|--|--|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER   |  | 5. LEASE DESIGNATION AND SERIAL NO.<br><u>SE-077652</u>                    |  |
| 2. NAME OF OPERATOR<br><u>Aztec Oil and Gas</u>   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                       |  |
| 3. ADDRESS OF OPERATOR<br><u>Drawer 570, Farmington, New Mexico</u>   |  | 7. UNIT AGREEMENT NAME   |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br><u>880 FSL &amp; 1505 FWL, Sec. 25-31N-12W</u> |  | 8. FARM OR LEASE NAME<br><u>East</u>                                       |  |
| 14. PERMIT NO.  |  | 9. WELL NO.<br><u>9</u>  |  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br><u>5992 Gr</u>  |  | 10. FIELD AND POOL, OR WILDCAT<br><u>Blanco Mesaverde</u>                  |  |
|   |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br><u>Sec. 25-31N-12W</u> |  |
|   |  | 12. COUNTY OR PARISH<br><u>San Juan</u>                                    |  |
|   |  | 13. STATE<br><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 checked="" 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 type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) <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.)\*

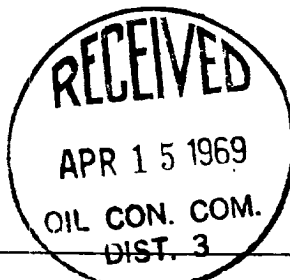
3-27-69 Moved in, rigged up. Pulled tubing, laid down 152 jts 2-3/8" 4.7# tubing. Picked up 1 jt washpipe, jars, 10 drill collars. Went in blowing down.

3-28-69 Blew down to 6300', logged off. Pulled up 5000'. Blew down @ 5800' with 200# supply gas.

3-29-69 Picked up 2-3/8" tubing with washpipe.

3-30-69 Blew down and washed over fish. Blew clean. Trip out. Went in with overshot, jarred on fish. Could not jar loose. Released overshot. Laid down 2-7/8" drillpipe.

3-31-69 Laid down drillpipe. Ran 152 jts 2-3/8" 4.7# EUE tubing landed 4784. Rigged down. Put back on production.



RECEIVED  
APR 14 1969  
U.S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

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

SIGNED J. O. Sullivan

TITLE District Superintendent

DATE April 10, 1969

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side