

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF-077652

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

East

9. WELL NO.

#21

10. FIELD AND POOL, OR WILDCAT

Astec Pictured Cliffs

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

Section 25-31N-12W

12. COUNTY OR PARISH 13. STATE

San Juan New Mexico

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Astec Oil & Gas Company

3. ADDRESS OF OPERATOR
P. O. Drawer 570, Farmington, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
790 FSL & 950 FWL, Section 25-31N-12W

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5968 Gr

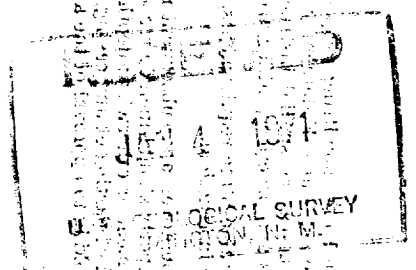
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

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 type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>CASING TEST & CMT JOB</u> <input checked="" type="checkbox"/>	
(Other)		(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.)*

12-8-70 Drlg surface. Ran 3 jts 8-5/8" 24# casing set at 107 RKB, Cmt with 100 sxs Class "C", 2% CaCl. Plug down at 9:30 PM. Tested casing to 500# - Held Ok.

12-10-70 TD 2532'. Ran ES Induction Log. Ran 78 joints 4 1/2" 10.5# (2525.45') landed at 2532', Cmt with 250 sxs 50-50 poz mix, 12 1/2# Gil, 4% Gel, followed by 100 sxs Class "C" neat. Plug down @ 12:40 AM. Tested casing to 3000# - Held Ok.



18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE District Superintendent DATE December 28, 1970

(This space for Federal or State office use)

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