

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 078095A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Horton

9. WELL NO.

#1A

10. FIELD AND POOL, OR WILDCAT

Blanco MV

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

7-31N-11W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6268 KB

12. COUNTY OR PARISH

13. STATE

San Juan

N. Mex.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) set cement plug

(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.)*

Placed 10' cmt plug on top of sand at model "D" pkr set at 7272 as per instructions from Mr. Al Kendrick, N. M. OCC, Aztec, N. M., as follows:

- BJ Cementers, Chief Transport, Elliott Riggs & Herman Fellhoelter on location
- 10:00 AM Wed., June 23, 1976, ck press on well, 700# on tbg
- pumped in 10 BW w/BJ to wet tbg & csg
- mixed 2 sx Class B cmt slurry, pumped down tbg, let cmt fall to btm, 10' cmt on top sand above BP
- waited 10 mins, washed tbg & csg w/40 BW
- SI well, job completed at 10:50 AM



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

SIGNED

TITLE Agent

DATE 29 June, 1976

Elliott A. Riggs

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Okal

*See Instructions on Reverse Side