

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-078134

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Pierce

9. WELL NO.

#1-A

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde

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

Section 30-31N-10W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

1. OIL ☐ GAS ☒ OTHER

2. NAME OF OPERATOR

Aztec Oil & Gas Company

3. ADDRESS OF OPERATOR

P. O. Drawer 570, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

1020' FSL & 1455' FEL
Section 30-31N-10W

14. PERMIT NO.

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

5970' GR

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)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

CASING REPORT

(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.)*

8-30-75 Ran 92 Joints Of 7" 23# Casing, Float Shoe Set At 2900'. Cemented With 330 Sacks Of 50/50 Poz, 6% D-20, 12½# Kolite Per Sack With 50 Sacks Of Class "A" & 2% Chloride. Plug Down At 4:30 AM.

9-2-75 Ran 55 Joints Of 4½" 10.50# Casing, Float Shoe Set At 5110', Hanger Set At 2802'. Cemented With 220 Sacks Of Class "A", 4% Gel & 2% Chloride. Plug Down At 8:10 AM.

SEP 5 1975

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

SIGNED

Jac C. Salmon

TITLE

District Superintendent

DATE

September 3, 1975

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side