

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF-078312

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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  GAS WELL  OTHER

2. NAME OF OPERATOR

Aztec Oil & Gas Company

3. ADDRESS OF OPERATOR

1 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

990 FSL & 1020 FWL, Section 15-32N-12W

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hubbard

9. WELL NO.

#4

10. FIELD AND POOL, OR WILDCAT

Mesaverde - Dakota

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

Section 15-32N-12W

14. PERMIT NO.

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

6067 Gr

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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

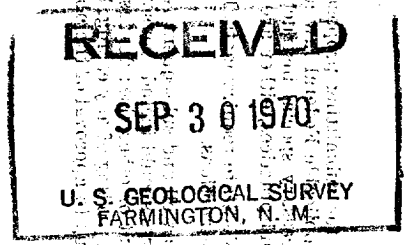
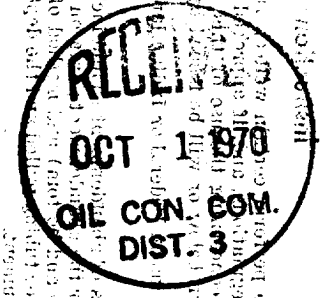
ALTERING CASING

ABANDONMENT\*

(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.)\*

1. Pulled Mesaverde and Dakota Tubing Strings.
2. Replaced 2 Joints 1-1/2" Tubing @ 5000' & 5050'.
3. Hydro-Test Dakota String - Held Ok.
4. Reran Tubing & Shut In For Test.



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

SIGNED

*J. C. Hamon*

TITLE

District Superintendent

DATE

September 29, 1970

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE