Form approved. Budget Bureau No. 1004-0135 UNITED STATES SUBMIT IN TRIPLICATE\*

DEPARTMENT OF THE INTERIOR (Other instructions on reverse side) form 3160-5 lovember 1983) Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. formerly 9-331) BUREAU OF LAND MANAGEMENT NM 03381 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.) 7. UNIT AGREEMENT NAME WELL  $\mathbf{x}$ OTHER 8. FARM OR LEASE NAME NAME OF OPERATOR Breech "B" Caulkins Oil Company ADDRESS OF OPERATOR P.O. Box 780 Farmington, New Mexico 87499

LOCATION OF WELL (Report location clearly and in accordance with any State regularements.)

See also space 17 below.)

At surface 172-E 10. FIELD AND POOL, OR WILDCAT Basin Dakota Blanco MV
11. BEC., T., R., M., OR BLK. AND
SURVEY OR AREA APRING 1986 890' F/S and 990' F/W AND ON TO THE AREA AREA Section 7, 26N 6W 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH 13. STATE 14. PERMIT NO. 6496 GR Rio Arriba New Mexico 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL TEST WATER SHUT-OFF PRACTURE TREATMENT ALTERING CASING FRACTURE TREAT ARANDON\* SHOOTING OR ACIDIZING SHOOT OR ACIDIZE REPAIR WELL CHANGE PLANS (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) Commingling Application 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.) \* It is proposed to down hole commingle Mesa Verde and Dakota Zones. This notice to advise BLM that hearing with State of New Mexico has been set asking for approval. BLM approval will be obtained prior to any work being done on well. CASE NO. 18. I hereby certify that the feregoing is true and correct Superintendent 4-5-85 **LUUTITLE** SIGNED & DATE (This space for Federal or State office use) APR 1 0 1985 Smm ACRA PATROCA TO WHOM IT MAY CONCERN:

A COPY OF THE ATTACHED APPLICATION

HAS BEEN FORWARDED TO NMOCC.

FARMERS ON PERCURATE ASSET

horm approved. Budget Bureau No. 1004-0135 form 3160-5 lovember 1983) UNITED STATES

DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATES (Other Instructions on reverse bilde) Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. Formerly 9-331) BUREAU OF LAND MANAGEMENT NM 03553 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.) 7. UNIT AGREEMENT NAME WELL WELL X NAME OF OPERATOR 8. FARM OR LEASE NAME Caulkins Oil Company Breech "D" 9. WELL NO. ADDRESS OF OPERATOR P.O. Box 780 Farmington, New Mexico 685-E LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.) 10. FIELD AND POOL, OR WILDCAT At surface Blanco Mesa Verde & Basin Dak 858' F/S and 927' F/RECEIVED 11. SEC., T., E., M., OR BLE. AND SURVEY OR AREA Section 11, 26N 6W
12. COUNTY OF PARISH | 13. STATE 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 14. PERMIT NO. 6529 GRAINGTON TEAU OF LAND PHENOLMENT Rio Arriba <u>New Mexico</u> 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSECUENT REPORT OF: TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING FRACTURE TREAT RHOOT OR ACIDIZE ARANDON\* SHOOTING OR ACIDIZING ABANDONMENT\* CHANGE PLANS REPAIR WELL (Other) . (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other) Commingling Application 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 gones pertinent to this work.). It is proposed to down hole commingle Mesa Verde and Dakota Zones. This notice to advise BLM that hearing with State of New Mexico has been set asking for approval. BLM approval will be obtained prior to any work being done on well. TO WHOM IT MAY CONCERN:

TO WHOM IT MAY CONCERN: A COPY OF THE ATTACHED APPLICATION HAS BEEN FORWARDED TO NMOCC.

	ACCEPTED ON REEDRO
18. I hereby conflict that the foregoing is true and correct  SIGNED Charles Cuperintend	lent DATE 4-5-85
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE SINC
*See Instructions on Reverse Sig	FARHAINGTON RESOURCE AREA

a manufacture of the same of t

form 3160-5 lovember 1983) Formerly 9-331)

14. PERMIT NO.

16.

## UNITED STATES DEPARTMENT OF THE INTERIOR VERNE BIDE

SUBMIT IN TRIPLICATES (Other instructions on re-

Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO.

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NM\_03554 6. IF INDIAN ALLOTTER 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.)			
:-	OIL GAS Y OTHER	7. UNIT AGREEMENT NAME		
ź.~	NAME OF OPERATOR	8. FARM OR LEASE NAME		
	Caulkins Oil Company	Breech "C"		
3.	ADDRESS OF OPERATOR	9. WELL NO.		
	P.O. Box 780 Farmington, New Mexico 87499	689		
4.	LOCATION OF WELL (Report location clearly and in accordance with any State requirements.	10. FIELD AND POOL, OR WILDCAT		
	See also space 17 below.) At surface	Blanco MV and Basin Dako		

and the second of the second second second second	Blanco MV and Basin Dakota
RECEIVED	11. SEC., T., R., M., OR BLE. AND SURVEY OR ARMA
1850' F/S and 790' F/W	
APA 00 1985	Section 12, 26N 6W
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
BUFLAU OT LA JORGANO MERIT FAE <b>6601</b> 0KB GOODS OT SETA	Rio Arriba New Mexico

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

NOTICE	E OF INT	ENTION TO:	SUBSEQUENT EMPORT OF:				
<u></u>							
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF EEPAIRING WELL			
FRACTURE TREAT	_	MULTIPLE COMPLETE		FRACTURE TREATMENT ALTERING CASING			
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING ABANDONMENT*			
REPAIR WELL		CHANGE PLANS		(Other)			
(Other) Commingling Application			X	(Norm: 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.)

It is proposed to down hole commingle Mesa Verde and Dakota Zones.

This notice to advise BLM that hearing with State of New Mexico has been set asking for approval.

BIM approval will be obtained prior to any work being done on well.

TO WHOM IT MAY CONCERN: A COPY OF THE ATTACHED APPLICATION HAS BEEN FORWARDED TO NMOCC.

		THE COURT AND LONG TO A STATE OF THE COURT AND
	ſ	ACCEPTED FOR RECORD
8. I hereby certify that the foregoing is true at	correct  Superintendent	DATE 4-5-85
(This space for Federal or State office use		APR 1 0 1985
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE  S M 725  ARCA MANAGER  FARMINGTON RUSQUECE AREA
	*See Instructions on Reverse Side	OPERATOR

i orm approved. Budget Bureau No. 1004-0135 UNITED STATES

SUBMIT IN TRIPLICATE\*

Other lowtructions on reverse side) form 3160-5 Fovember 1983) Lxpires August 31, 1985 Formerly 9-331) 5. LEASE DESIGNATION AND SERIAL NO. BUREAU OF LAND MANAGEMENT NM 03554 8. 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.) 7. UNIT AGREEMENT NAME WELL X WELL | OTHER NAME OF OPERATOR 8. FARM OR LEASE NAME Caulkins Oil Company Breech "C" 9. WBLL NO. ADDRESS OF OPERATOR P.O. Box 780 Farmington, New Mexico 87499 689-M LOCATION OF WELL (Report location clearly and in accordance with any State requirements. 10. FIELD AND POOL, OR WILDCAT See also space 17 below.) At surface Blanco MV and Basin Dakota 11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 920' F/S and 1100' F/E Mad De Iteo Section 12, 26N 6W 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH | 13. STATE 14. PERMIT NO. 6600 GR Rio Arriba New Mexico 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSECUENT EXPORT OF: PULL OR ALTER CASING WATER SHUT-OFF TEST WATER SHUT-OFF REPAIRING WELL MULTIPLE COMPLETE FRACTUBE TREATMENT ALTERING CASING FRACTURE TREAT SHOOT OR ACIDIZE ABANDON . SHOOTING OR ACIDIZING ABANDONMENT\* CHANGE PLANS REPAIR WELL (Other) (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) Commingling application 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.) \* It is proposed to down hole commingle Mesa Verde and Dakota Zones. This notice to advise BLM that hearing with State of New Mexico has been set asking for approval. . . BLM approval will be obtained prior to any work being done on well. TO WHOM IT MAY CONCERN: A COPY OF THE ATTACHED APPLICATION HAS BEEN FORWARDED TO NMOCC. ACCEPTED FOR RECORD 18. I hereby certify that the foregoing is true and correct Superintendent 4-5-85 SIGNED ( - TITLE

ACCEPTED FOR RECORD

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

SIGNED CALL TITLE Superintendent

DATE 4-5-85

APPROVED BY TITLE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

OPERATOR

Check Appropriate Box To Indicate Nature of Notice, Report, or On Notice of Intention to:  TEST WATER SHUT-OFF  FULL OR ALTER CASING WATER SHUT-OFF  WATER SHUT-OFF	ther Data  ENT EBPORT OF:	Tiew neares
Check Appropriate Box To Indicate Nature of Notice, Report, or O	ther Data	INGW HEALEO
		Hew Henre
6532 KB	Rio Arriba	New Mexico
PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
MPR 0.0 1895	Section 13.	26N 6W
1140' F/N and 900' F/E E C E I V E D		
	10. FIELD AND POOL, OR	WILDCAT
P.O. Box 780 Farmington, New Mexico 87499	248	
ADDRESS OF OPERATOR	9. WBLL NO.	`
Caulkins Oil Company	Breech "	C''
NAME OF OPERATOR	8. FARM OR LEASE NAM	<b>E</b>
OIL GAB T	7. UNIT AGREEMENT NA	M E
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.)	6. IF INDIAN, AULIOTTEE	OR TRIBE NAME
BUREAU OF LAND MANAGEMENT	NM 03554	
Orm 3160-5 (Ovember 1983)  DEPARTMENT OF THE INTEDIOD (Other Instructions on recognition)	Budget Bureau l Expires August	31, 1985
	DEPARTMENT OF THE INTERIOR (Other Instructions on remotly 9-331)  BUREAU OF LAND MANAGEMENT  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.)  OIL GAS WELL OTHER  NAME OF OPERATOR  Caulkins Oil Company  ADDRESS OF OPERATOR  P.O. Box 780 Farmington, New Mexico 87499  LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  1140' F/N and 900' F/E C C C V E D  ADDRESS OF OPERATOR (Show whether DF, RT, CR, etc.)	DEPARTMENT OF THE INTERIOR (Other Instructions on Transcriptions)  BUREAU OF LAND MANAGEMENT  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.  OIL GAS WELL NOTHER  OIL WELL NOTHER  Caulkins Oil Company  ADDRESS OF OPERATOR  P.O. Box 780 Farmington, New Mexico 87499  LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  At surface  1140' F/N and 900' F/E C C V D  PERMIT NO.  DESCRIPTION OF WELL (Report location clearly and in accordance with any State requirements.*  Section 13, 2  Section 13, 2  Section 13, 2  15. ELEVATIONS (Show whether DF, RT, GR, etc.)  12. COUNTY OR PARISH

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.) \*

(Other) ...

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

It is proposed to down hole commingle Mesa Verde and Dakota Zones.

CHANGE PLANS

Commingling Application

REPAIR WELL

(Other)

This notice to advise BLM that hearing with State of New Mexico has been set asking for approval.

BIM approval will be obtained prior to any work being done on well.

TO WHOM IT MAY CONCERN: A COPY OF THE ATTACHED APPLICATION HAS BEEN FORWARDED TO NMOCC.

	The second secon
18. I hereby certify that the foregoing is true and correct  SIGNED Cheeker C. CLEGULTITLE Superintendent	ACCEPTED FOR ISSUED
(This space for Federal or State office use)  APPROVED BY	DATEAPR 1 0 1985
*See Instructions on Reverse Side  OPERATOR	AREA MAHAGER FARMINGTON RESOURCE AREA

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

form 3160-5 lovember 1983) Formerly 9-331)

16.

## UNITED STATES DEPARTMENT OF THE INTERIOR SUBMIT IN TRIPLICATE\* (Other instructions on reverse side)

horm approved. Budget Bureau No. 1004-0135 Expires August 31, 1985

5. LEASE DESIGNATION AND BERIAL NO.

and the second of the property of the

BUREAU OF LAND MANAGEMENT	SF 079035-A			
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.)	6. IP INDIAN, ALLOTTZE GR TRIBE NAME			
OIL GAS TOTHER	7. UNIT AGREEMENT NAME			
2. NAME OF OPERATOR	8. FARM OR LEASE NAME			
Caulkins Oil Company	Breech "A"			
3. ADDRESS OF OPERATOR	9. WELL NO.			
P.O. Box 780 Farmington, New Mexico 87499	229-M			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*	10. FIELD AND POOL, OR WILDCAT			
See also appace 17 below.) At surface  RECEIVED	Blanco MV and Basin Dakota			
1120' F/N and 890' F/E APR 06 1365	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA			
	Section 17, 26N 6W			
14. PERMIT NO.   15. ELEVATIONS (Show whether of, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE			
6754 GR	Rio Arriba New Mexico			

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

NOTICE OF	INTENTION TO:	SUBSEQUENT REPORT OF:			
<u></u>					
TEST WATER SHUT-OFF	PULL OR ALTER CASING	I	WATER SHUT-OFF	REPAIRING WELL	
FHACTURE TREAT	MULTIPLE COMPLETE		FRACTUBE TREATMENT	ALTERING CABING	
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABANDONMENT*	
REPAIR WELL	CHANGE PLANS		(Other)		
(Other) Commingling	Application	$\times$	(NOTE: Report results of mult Completion or Recompletion Re	spie completion on Well port 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.) \*

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	ACCEPTEDICO VECDO
18. I hereby certify that the foregoing is true and correct  SI:NED Charles Co. Cliquetitle Superintendent	DATE 4-5-85
(This space for Federal or State office use)  APPROVED BY	APR 1 0 1985
	AREA MANAGER FARMINGTON RESOURCE AREA
*See Instructions on Reverse Side	ODED A T

form 3160-5 Hovember 1983) Formerly 9-331)

16.

## UNITED STATES DEPARTMENT OF THE INTERIOR SUBMIT IN TRIPLICATES (Other Instructions on reverse side)

Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND BERIAL NO.

BUREAU OF LAND MANAGEMENT	NM 03553
SUNDRY NOTICES AND REPORTS ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME

	(Do not use this form fo Use "/	r proposals to drill or to deepen or plug back to a different reservoir. APPLICATION FOR PERMIT—" for such proposals.)		
.—	OIL GAB X O	THER	7. UNIT AGREEMENT NA	MR
2.	NAME OF OPERATOR		8. FARM OR LEASE NAM	E
		Caulkins Oil Company	Breech "	D''
3.	ADDRESS OF OPERATOR		9. WELL NO.	,
		P.O Box 780 Farmington, New Mexico 87499	341-M	
4.	LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)		10. FIELD AND POOL, OF	WILDCAT
	At surface	RECEIVED	Blanco MV and	Basin Dakot
		1850' F/N and 1880' F/W APR 051055	11. SEC., T., E., M., OR S SURVEY OR AREA	LK. AND
		7477-4-074-0-4	Section 21, 2	
14.	PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.)	12. COUNTY OR PARISH	13. STATE
		6675 GR	Rio Arriba	New Mexico

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

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF		PULL OR ALTER CASING	<b> </b>	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE		ABANDON®		SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL		CHANGE PLANS		(Other)	
(Other) Comming	gling A	Application	X	(NOTE: Report results of mult Cumpletion or Recompletion Re	iple completion on Well

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TO WHOM IT MAY CONCERN: A COPY OF THE ATTACHED APPLICATION HAS BEEN FORWARDED TO NIMOCC.

	ACCEPTED FOR MEGORD
SIGNED Charles & Charles Superintendent	DATE 4-5-85
(This space for Federal or State office use)	APR 1 0 1985
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	AREA MANAGER FARMINGTON DESCURCE AREA
*See Instructions on Reverse Side	OPERATOR