

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

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

Form approved.  
Budget Bureau No. 42-R1424.

**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.)

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR <b>Consolidated Oil &amp; Gas, Inc.</b></p> <p>3. ADDRESS OF OPERATOR <b>1860 Lincoln St., Denver, Colo 80295</b></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>1800' FSL &amp; 790' FEL</b></p> <p>14. PERMIT NO.</p> <p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>7232' G.L.</b></p>	<p>5. LEASE DESIGNATION AND SERIAL NO. <b>Contract #101</b></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Jicarilla Apache</b></p> <p>7. UNIT AGREEMENT NAME</p> <p>8. FARM OR LEASE NAME <b>Huron</b></p> <p>9. WELL NO. <b>#3A</b></p> <p>10. FIELD AND POOL, OR WILDCAT <b>Mesa Verde</b></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 2, T26N, R4W NMPM</b></p> <p>12. COUNTY OR PARISH <b>Rio Arriba</b></p> <p>13. STATE <b>New Mexico</b></p>
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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>Case &amp; Cement</u> <input checked="" type="checkbox"/>	

(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.)\*

**11-17-77:** Drill 8 3/4" hole to 4270' K.B. - Ran 4258' 7" 23# K-55 Rge 3 ST&C casing & set @ 4270' KB - Cement w/150 sx 65/35 poz w/12% gel & 100 sx C1 "B" w/2% CaCl<sub>2</sub> - Plug down @ 7:45 p.m. - WOC 12 hrs.

**11-18-77:** Pressure test to 1000 psi - O.K. - Cement by temp. survey 2900'.

**11-20-77:** Air drill 6 1/4" hole to 6370' KB. Ran Schl. Gr. - SNP, FDC and Ind.-Gr. Logs

**11-21-77:** Ran (2248') 4 1/2" 10.5# K-55 Rge 3 ST&C Liner - set @ 6360' KB Float collar @ 6319' KB - Top BOT Liner 4912' KB - Cement w/250 sx 50-50 poz w/4% gel, 0.4% FLA & 10# fine Gilsonite/sx. Set pack off and reverse out - Release Rig @ 2:00 p.m.

Waiting on Completion Rig.



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

SIGNED *John W. ...* TITLE Sr. Drilling Engineer DATE 11-29-77

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: