

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

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 ☐	DATE - 8 PM 4:26	5. LEASE DESIGNATION AND SERIAL NO. SF-078359
2. NAME OF OPERATOR Jack A. Cole	FARMINGTON RESOUCE AREA FARMINGTON, NEW MEXICO	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Fee
3. ADDRESS OF OPERATOR P. O. Box 191, Farmington, New Mexico 87499		7. UNIT AGREEMENT NAME Marcus "A"
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 965' FNL, 1680' FEL		8. FARM OR LEASE NAME 4
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6869 GR	9. WELL NO. 10. FIELD AND POOL, OR WILDCAT Lvbbrook Gallup
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW 1/4 NE 1/4
		12. COUNTY OR PARISH Rio Arriba
		13. STATE New Mexico

16. 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 ☐	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) Change Lease Name ☒	

(Other) ☐ (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.)

Location was originally staked as the Marcus A #4.

Well name has been changed to the Rincon No. 12.

RECEIVED
JUN 02 1989
OIL CON. DIV.
DIST. 3

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

SIGNED Lawrence Blum TITLE Production Superintendent DATE February 7, 1989

(This space for Federal or State office use)

APPROVED BY John Skellern TITLE AREA MANAGER

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side