

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.

NM 7262

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Dome Rusty 20-22-7

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Rusty Chacra Extension

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

Section 20-T22N-R7W

14. PERMIT NO.

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

6796' GR

12. COUNTY OR PARISH

13. STATE

Sandoval

N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

REPAIRING WELL

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(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.) \*

6-30-78: Pressure test casing to 2500 psi. OK. Perforate 1440-74; 1511-1600 with one shot per foot. Frac with 30,000 # 10-20 sand and 15,000 gallons of foam.

7-8-78: Landed 2 3/8" tubing at 1723. PBTD 1764.



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

SIGNED

Paul C. Ellison

TITLE Production Manager

DATE July 19, 1978

(This space for Federal or State office use)

APPROVED BY

*Paul C. Ellison*

TITLE

DATE

JUL 20 1978

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY  
OFFICE, D.C.