

Form 9-331
(May 1963)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(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.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Wildcat</u>		5. LEASE DESIGNATION AND SERIAL NO. <u>NM-5938</u>
2. NAME OF OPERATOR <u>Eco, Inc.</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <u>P.O. Box 669 Santa Fe, N.M. 87501</u>		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) <u>At surface</u> <u>790' FNL 790' FWL Sec 17 T22N R9W NMPM</u>		8. FARM OR LEASE NAME <u>Federal E</u>
14. PERMIT NO.		9. WELL NO. <u>1</u>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>GR 6424</u>		10. FIELD AND POOL, OR WILDCAT <u>Wildcat</u>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>17-22N-9W NMPM</u>
		12. COUNTY OR PARISH <u>San Juan</u>
		13. STATE <u>NM</u>

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 checked="" 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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input 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.)

10-15-74 Perforated with two holes at 3880. Cemented pipe behind Gallup formation with 150 sacks Class "B" cement and 106#s CFR-2. Circulation was obtained to surface and a good cement job was obtained.

Approval of above work was obtained 5-13-74 under "assuming commercial production not found."

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

SIGNED

Harry R. Bugh

TITLE

President

DATE

11-18-74

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: