	UNITED STATES RTMENT OF THE INTERIOR REAU OF LAND MANAGEMENT	į	Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 LEASE DESIGNATION AND BERIAL NO. SF-078563
	OTICES AND REPORTS O	N WELLS	. IF INDIAN, ALLOTTOE OR TRIES NAME
OIL GAS GAS WELL OTH	ER	7	. UNIT AGREEMENT NAME
2. NAME OF OPERATOR		8	, FARM OR LEASE NAME
Jack A. Cole 3. ADDRESS OF OPERATOR			Rincon (FRACE, FED.
	gton, New Mexico 87499		# # 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850 FNL, 1820 FWL			O. FIELD AND POOL, OR WILDCAT DOC STOKES ESCRITO Gallup 1. SEC. T. B., M., OR BLK. AND SURVEY OR ARYA SEL NW14
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, I	RT, GR, etc.)	Sec. 24-T24N-R7W 2. COUNTY OR PARISH! 13. STATE
		20 170	Rio Arriba New Mexico
	Appropriate Box To Indicate No	ature of Notice, Report, or Oth	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHCT-OFF	BEPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other) Spud New W	multiple completion on Well
(Other) 17. DESCRIBE PROPOSED OR COMPLETE proposed work. If well is dinent to this work.)	D OPERATIONS (Clearly state all pertinent irectionally drilled, give subsurface location	Completion or Recompletion details, and give pertinent dates. In one and measured and true vertical control of the control of	cluding estimated date of starting any
	new casing. Measured 2 250 sacks (295 Ft.) C1 per sack. Plug down 10 cement to surface.	ass "B", 3% CAC1 and 1	./4 lb. Flocele
12-11-88	Test B.O.P. with 1000 p	osi for 15 minutes. T ϵ	
			est okay.
S AH IO: OB NESSURGE ARE			est okay.
TO 15 AH ID: 08			est okay.
IS AH IO: OS			est okay.
CS DEC 13 AH IO: 08 FARMINGTON. NEW MEXIC			est okay.
18. I hereby certify that the forego SIGNED Caucayne S	Canal H TITLE Proc	duction Superintendent	DATE December 12, 19
CS DEC 13 AH IO: 08 FARMINGTON. NEW MEXIC	Canal H TITLE Proc		DATE December 12, 19
18. I hereby certify that the forego SIGNED Cauchine Bridge Bridg	TITLE Processes TITLE Processes TITLE	duction Superintendent	
18. I hereby certify that the forego SIGNED Course of State APPROVED BT	ritle Proc	duction Superintendent	DATE December 12, 19 ACCEPTED FOR RECCE DEC 1 5 1988