

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

5. Lease  
NM-03551

**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)

6. If Indian, Allottee or Tribe Name

7. Unit Agreement Name

1. Oil Well [ ] Gas Well [ ] Other [ ]  
GAS WELL

8. Well Name and No.  
BREECH "E" 54-E

2. Name of Operator:  
Caulkins Oil Company

9. API Well No.  
300392232500-T2

3. Address of Operator:  
(505) 632-1544  
P.O. Box 340, Bloomfield, NM 87413

10. Field and Pool, Exploratory Area  
DAKOTA, MESA VERDE, CHACRA

4. Location of Well (Footage, Sec., Twp., Rgn.)  
990' F/S 903' F/E, SEC. 4-26N-6W

11. Country or Parish, State  
Rio Arriba Co., New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Pulled Tubing
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

17. Describe Proposed or Completed Operations:

8-1-94 Pulled 2 3/8" tubing with seal assembly.

Tubing partially plugged with Barium Sulfate in bottom 3 joints.

Replaced plugged joints.

Re-ran 2 3/8" tubing to 7292' with Baker R-3 packer set at 4075'.

Reverse flow check valve immediately above packer.

Well resumed production, August 7, 1994

NOTE: The format is issued in lieu of U.S. BLM Form 3160-5

18. I HEREBY CERTIFY THE FOREGOING IS TRUE AND CORRECT

SIGNED: Robert L. Verquer TITLE: Superintendent DATE: 10/21/94

ACCEPTED FOR RECORD

APPROVED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: 1994

CONDITIONS OF APPROVAL, IF ANY

FARMINGTON DISTRICT OFFICE  
10/21/94