

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT 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)		5. Lease <div style="text-align: right;">NM-03553</div>
		6. Indian, Allotment or Tribe Name BLM
		7. Unit Assignment Name 9 JUN -6 PM 2:00
1. Oil Well [] Gas Well [] Other [] <div style="text-align: center;">GAS WELL</div>		8. Well Name and No. 070 BREECH "D" 346-M
2. Name of Operator: <div style="text-align: center;">Caulkins Oil Company</div>		9. API Well No. <div style="text-align: center;">300392343000-D1</div>
3. Address of Operator: <div style="text-align: center;">(505) 632-1544 P.O. Box 340, Bloomfield, NM 87413</div>		10. Field and Pool, Exploratory Area BASIN DAKOTA, MESA VERDE
4. Location of Well (Footage, Sec., Twp., Rge.) 1520' F/S 990' F/E, SEC. 22-26N-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 checked="" type="checkbox"/> [X] Notice of Intent <input type="checkbox"/> [] Subsequent Report <input type="checkbox"/> [] Final Abandonment Notice	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <input type="checkbox"/> [] Abandonment <input type="checkbox"/> [] Recompletion <input type="checkbox"/> [] Plugging Back <input type="checkbox"/> [] Casing Repair <input type="checkbox"/> [] Altering Casing <input checked="" type="checkbox"/> [X] Other Wellhead Repairs </div> <div style="width: 35%;"> <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 </div> </div>	
13. Describe Proposed or Completed Operations: 5-23-94 Tests conducted on this well indicate a leak in wellhead to bradenhead. We intend to pull tubing, remove wellhead and repair or replace seals as needed to shut off leak. Wellhead will be reset and tubing re-run. Well will be kept dead during all operations. Approval for a small pit is requested during workover operations. No new surface will be disturbed, location area and pit will be cleaned-up and covered when work is completed. Estimated starting date - August 15, 1994.		
NOTE: The format is issued in lieu of U.S. BLM Form 3160-5		
14. I HEREBY CERTIFY THE FOREGOING IS TRUE AND CORRECT SIGNED: <u>Robert L. Verquer</u> TITLE: <u>Superintendent</u> DATE: <u>05/24/94</u> <div style="text-align: center;">ROBERT L. VERQUER</div>		
APPROVED BY: _____ TITLE: _____ CONDITIONS OF APPROVAL, IF ANY		

RECEIVED
JAN 10 1964
U.S. AIR FORCE
HEADQUARTERS
WASHINGTON, D.C.