Form 9-331 (May 1963)	UNITED STATES DEPARTMENT OF THE II	NTERIOR (Other instructions on re	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.
SUNDRY NOTICES AND REPORTS ON WELLS			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use this	THE STATE OF THE NAME		
OIL GAS X OTHER			7. UNIT A
Aztec Oil and Gas Company 3. Address of Operator			8. FARM OR LEASE NAME
			9. WELL NO.
Drawer 570 Farmington, New Mexico 4. Location of well (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface			10. FIELD AND POOL, OR WILDCAT
			Fulcher Kutz-P.C. 11. SEC., T., R., M., OR BLE, AND SURVEY OR AREA
14. PERMIT NO. Sec. 19-29N-11W 16. ELEVATIONS (Show whether DF, RT, GR, etc.)			See 10 cov lave
14. PERMIT NO.	15. ELEVATIONS (Show w.		Sec. 19-29N-1W 12. COUNTY OR PARISH 13. STATE
16.		5685	San Juan New Mexic
	Check Appropriate Box to Indi	cate Nature of Notice, Report, or (The state of the s
		Paragra	URNT REPORT OF
TEST WATER SHUT-OF FRACTURE TREAT	PULL OR ALTER CASING MULTIPLE COMPLETE	WATER SHUT-OFF	REPAIRING WELL
SHOOT OR ACIDIZE	ABANDON*	FRACTURE TREATMENT SHOOTING OR ACIDIZING	ALTERING CABING
REPAIR WELL	XX CHANGE PLANS	(Other)	ABANDONMENT
(Other)		(Note: Report results Completion or Recomp pertinent details, and give pertinent dates, ace locations and measured and true vertice	of multiple completion on Well letion Report and Log form.)
Propose to		pertinent details, and give pertinent dates ace locations and measured and true vertic	al depths for all markers and sones perti-
	Run 32" casing to T.D. a possible holes in 5	out open hole from 1816' nd cement to surface, squ	eezing T TETT
	Perforate and sand-water Clean out and run 1" tub	frac Pictured Cliffs zon	●•4. 長衛道 一世 多寶克茅
	Put back on production	riiR•:	Control of the contro
			to ballone de la company de la
		OFT.FIVED	Therefore I would be a second of the second
		Idrom mm	RECEIVED
		MAR 2 9 1968	
		OIL CON COM	MAR 2 1038
18. I hereby certify that #	he foregoing is true and correct		UES GEOLOGICAL SURVEY
SIGNED /	(Halana)	L' District Superintendent	* * *
(This space for Federa	l or State office use)		
APPROVED BYCONDITIONS OF APP	PROVAL, IF ANY:		DATE

