

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. OIL WELL ☐ GAS WELL ☒ OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Aztec Oil & Gas Company</i>		8. FARM OR LEASE NAME <i>Grenier</i>
3. ADDRESS OF OPERATOR <i>P. O. Drawer 570, Farmington, New Mexico</i>		9. WELL NO. <i>A #6</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <i>990 FNL & 990 FEL, Section 34-30N-10W</i>		10. FIELD AND POOL, OR WILDCAT <i>Aztec Pictured Cliffs</i>
11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA <i>Section 34-30N-10W</i>		12. COUNTY OR PARISH <i>San Juan</i>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>6005 Gr</i>	13. STATE <i>New Mexico</i>

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

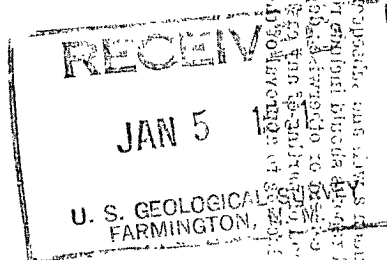
WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) <i>CASING TEST & CMT JOB</i> ☒	

(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.)*

12-5-70 Ran 3 joints 8-5/8" 24# casing set at 104', Cmt'd w/100 sxs Class "C", 2% CaCl. Plug down at 2:45 PM. Tested casing to 500# - Held Ok.

12-7-70 TD 2619'. Ran 80 joints 4 1/2" 10.50# casing (2633') set at 2620 KBM, Cmt'd with 250 sxs class "C". Plug down at 12:15 AM. Tested casing to 3000# - Held Ok.



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

SIGNED

[Signature]

TITLE

District Superintendent

DATE

January 4, 1971

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR NMOLD RECORD

*See Instructions on Reverse Side