

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO.
2. NAME OF OPERATOR NORTHWEST PRODUCTION CORPORATION		6. IF INDIAN, ALLOTTEE OR TRIBE NAME JICARILLA CONT #126
3. ADDRESS OF OPERATOR P.O. BOX 1796, EL PASO, TEXAS 79949		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850' FSL and 990' FEL Sec 12-T24N-R4W, Unit I		8. FARM OR LEASE NAME S
14. PERMIT NO.		9. WELL NO. 13
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6820 Ungraded Ground		10. FIELD AND POOL, OR WILDCAT SOUTH BLANCO PC
		11. SEC, T., R., M., OR BLK. AND SURVEY OR AREA Sec 12, T24N-R4W
		12. COUNTY OR PARISH RIO ARRIBA
		13. STATE NEW MEXICO

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)\*

T.D. 3150' PBD 3143'. Propose to plug 4½" csg from 3053' to 2672' to cover Ojo Alamo formation. Will squeeze bradenhead with 50 sacks and place 10 sack plug in top of casing and place dry hole marker on well. Estimated date May 15, 1969.



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

SIGNED

*Charles E. Delaney*

TITLE Mgr., Prod. Oper.

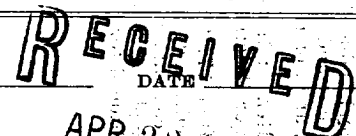
DATE April 21, 1969

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE



\*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY  
DURANGO, COLO.