

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

FORM APPROVED
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back on a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-13771
2. NAME OF OPERATOR Rex K. Baker	6. IF INDIAN, ALLOTTEE OR TRIBE NAME -----
3. ADDRESS OF OPERATOR Rt. 2 Box 256 V Aztec, NM 87410	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 SE $\frac{1}{4}$ of NW $\frac{1}{4}$ Sec. 15, T 25N, R 1E 1850' Fw1 1850' FNL Sec. 15	8. FARM OR LEASE NAME # 1 Federal
	9. WELL NO. # 1
	10. FIELD AND POOL, OR WILDCAT Wildcat
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15 T 25N R 1E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7,017	12. COUNTY OR PARISH Rio Arriba
	13. STATE NM

16. SEP 30 1985

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input checked="" type="checkbox"/>		

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.)*

SALAZAR DRILLING CO. - CONTRACTOR

Drilled to 2,660' - enclosed report after testing Tocito and Green Horn, released contractor. - - - Reconsidered and decided to redrill to original depth 4,600' to test pennsylvanian. Will restart operations by June 1, 1986 considering weather conditions.

RECEIVED
OCT 07 1985
OIL CON. DIV.
DIST. 3

Not to exceed 1 year
See attached Compt. forms

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

SIGNED <u>Rex K. Baker</u>	TITLE <u>Operator</u>	DATE <u>Sept. 16, 1985</u>
FOR SEVILLE-TRIDENT CORPORATION		
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

NMOCC