

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

SUNDRY NOTICES AND REPORTS ON WELL MAIL ROOM
(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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. SF-080202-B	
2. NAME OF OPERATOR Jack A. Cole		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. Box 191, Farmington, New Mexico 87499		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 1685' FNL, 520' FEL		8. FARM OR LEASE NAME Marcus	
14. PERMIT NO.		9. WELL NO. 10	
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 6791 GL 6805 KB		10. FIELD AND POOL, OR WILDCAT Lybrook Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SWNE	
		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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <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.)*

See Attached for Casing and Cement Summary.

RECEIVED
JUL 01 1987
OIL CON. DIV.
1 DBT. 3

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

SIGNED Dwayne Blumett TITLE Production Superintendent ACCEPTED FOR RECORD 24 1987

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE JUN 29 1987

CONDITIONS OF APPROVAL, IF ANY: _____

FARMINGTON RESOURCE AREA
BY SMV

*See Instructions on Reverse Side

NMCCC

MARCUS NO. 10

Casing and Cement Summary

6-20-87

TD-5640'. Ran 142 joints, 4 1/2", 10.50 lb., K-55 casing. Measured 5623.85, set at 5635.45. Float collar-5591.85 (KB), Stage collar- 4032.12 (KB). First stage cemented as follows:

Pump 10 bbls. fresh water, 10 bbls. CaCl_2 water, 10 bbls. fresh water, 12 bbls. Flocheck-21, 10 bbls. water spacer followed by 375 sacks, (532 cu. ft.) 50-50 pozmix, 2% gel, 6 1/4 lbs. Gilsonite and 6 lbs. salt per sack. Plug down 11:45 P.M. 6-21-87.

Circulated cement by stage collar. Circulated 4 hours between stages.

Second stage - same spacer program as the first stage followed by 500 sacks, (1320 cu. ft.) 65-35 pozmix, 12% gel, 6 1/4 lbs. Gilsonite per sack followed by 50 sacks, (59 cu. ft.) Class "B" cement. Plug down 4:45 A.M. 6-22-87.

Circulated 24 bbls. cement.