

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse 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 <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. SF 079035 A	
2. NAME OF OPERATOR Caulkins Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Post Office Box 780, Farmington, New Mexico		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 660 from North and 760 from West		8. FARM OR LEASE NAME Breech A	
14. PERMIT NO.		9. WELL NO. 629	
15. ELEVATIONS (Show whether DP, ST, GR, etc.) 6423 DF		10. FIELD AND POOL, OR WILDCAT Undes. Gallup	
		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Section 9 26 North 6 West	
		12. COUNTY OR PARISH Rio Arriba	13. STATE New Mex.

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

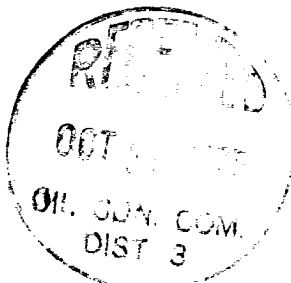
SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" 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) Plug Back	

(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.)*

8-1-75 - Set cement retainer at 6488'. Cemented perforations 6585 - 6595 with 50 sacks.
8-2-75 - Perforated 6438 - 6448, 6414 - 6424, and 6390- 6400 with two holes per foot.
8-3-75 - Fractured perforations with 28,130# 20-40 mesh sand and 1620 bbls. water.
Well swabbed and flowed to clean up. Potential test run 9-30-75.
10-29-75 - Well shut in for pipeline connection.



OCT 30 1975

U. S. GEOLOGICAL SURVEY
BUREAU, COLO.

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

SIGNED Charles E. Dejeu TITLE Superintendent DATE 10-29-75

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: