

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 03351

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Breech 3

9. WELL NO.

121

10. FIELD AND POOL, OR WILDCAT

South Blanco-Otero Chacra

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Section 7 26N 6W

12. COUNTY OR PARISH

13. STATE

Rio Arriba

New Mex.

1.

OIL ☐ GAS ☐  
WELL WELL OTHER

2. NAME OF OPERATOR

Caulkins Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 340, Bloomfield, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)

At surface

930 from the North and 600 from the West

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6600 Gr.

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

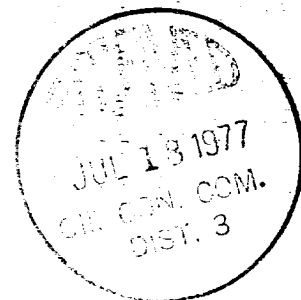
## NOTICE OF INTENTION TO:

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) ☐(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 perti-  
nent to this work.)\*

Spud 1:00 PM 6-26-77

Drilled 12 1/4" hole to 143' and cemented 8 5/8" 24# J-55 casing at 143'  
with 150 sacks. 2, CaCl. Plug down 6:30 PM 6-28-77.  
Cement circulated to surface.Tested surface casing with 600# 6-29-77. No decrease in pressure after  
testing 30 minutes.

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

SIGNED

*Charles Vergara*

TITLE

Superintendent

DATE

6-30-77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side