

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 <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 03381	
2. NAME OF OPERATOR Caulkins Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. 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 1130 from the South and 860 from the East		8. FARM OR LEASE NAME Breech B	
14. PERMIT NO.		9. WELL NO. 196	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6407 Gr		10. SOUTH PLATON WADCO PC Otero-Chacra	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 7 26N 6W	
		12. COUNTY OR PARISH Rio Arriba	
		13. STATE N Mex.	

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 PLANS <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.)*

Spud at 12:00 Midnight 6-7-78

Drilled 12 1/4" hole to 105'

Cemented 8 5/8" 24# K-55 new casing at 105' with 85 sacks of 2% CaCl

Plug down 3:30 AM 6-7-78

Cement circulated to surface

Tested surface casing 6-8-78 with 500# for 30 minutes.

No decrease in pressure

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

SIGNED Dorape Blencett

TITLE Prod. Foreman

DATE 6-10-78

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

DATE JUN 16 1978