

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
Caulkins Oil Company

3. ADDRESS OF OPERATOR
P.O. Box 780 Farmington, New Mexico

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1715' F/S & 1825' F/W
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

5. LEASE
SF 079304

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Sanchez

9. WELL NO.
1 E

10. FIELD OR WILDCAT NAME Otero Chacra,
Blanco Mesa Verde, Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 24 26N 6W

12. COUNTY OR PARISH Rio Arriba
13. STATE New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6676' GR.

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

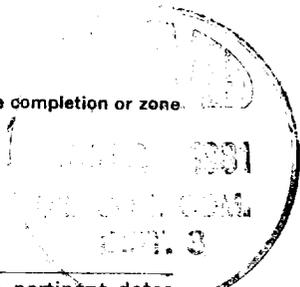
ABANDON*

(other)

SUBSEQUENT REPORT OF:

RECEIVED
MAY 28 1981
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)



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 4:00 PM 5-22-81.

Drilled 13 3/4" hole to 285'.

Ran 9 5/8" 32.30# H-40 casing to 285' - cemented with 250 sacks Class B Cement and 2% CaCl. Cement circulated to surface.

Plug down 12:00 Midnight 5-22-81.

5-24-81 Cement set 24 hours, then tested 9 5/8" casing with 900# for 30 minutes. No decrease in pressure.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Charles E. Vergara TITLE Superintendent DATE 5-26-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAY 20 1981

*See Instructions on Reverse Side

NMOCC

FARMINGTON DISTRICT
BY Dan Elliott