Torm 3160-5 November 1983) Formerly 9-331) BUREAU OF LAND MANAGEMENT Torm 3160-5 SUBMIT IN TRIPLICATE* (Other instructions on re- property 9-331) BUREAU OF LAND MANAGEMENT			Form approved. Budget Burean No. 1004-0135 Expires August 31, 1985 5. LEASE DEPUNATION AND SERIAL NO. NM 03554 6. IJ INDIAN, ALLOTTER OR TRIBE NAME		
SUNDRY NOTION OF THE PROPERTY	CES AND REPORTS (Is to drill or to deepen or plug be rion for PERMIT—" for puckers	ON WELLS ack to a different reservoir.	7. UNIT AGREMENT NAM		
OIL GAS WELL OTHER		JUL 1 0 1985	S. FARM OR LEASE NAME		
Caulkins Oil Company BUREAU OF LAND MANAGEMENT			Breech "C"		
P.O. Box 780 Farmington, New Mexico 87499			9. WELL NO.	689-M	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface			10. FIELD AND POOL, OR WILDCAT Blanco MV - Basin Dakota 11. SEC., T., E., M., OR BLE. AND SURVEY OR ARMA		
920' F/S a	nd 1100' F/E		0	26 West 6'West	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF	, RT, GR, etc.)	12. COUNTY OR PARISH	26 North 6 West	
	6600 Gr		Rio Arriba	New Mexico	
16. • Check App	propriate Box To Indicate N	lature of Notice, Report, or	Other Data		
NOTICE OF INTENT	ION TO:	AUBAR	QUENT EFFORT OF:	_	
PRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL C	CLL OR ALTER CASING	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report result	ALTERING CA ABANDONMEN ts of multiple completion of	1°	
(Other) Commingling App 17. BERCHIEF PROPUSED OR COMPLETED OFER proposed work. If well is direction nent to this work.) *	ATIONS (Clearly state all pertinen	t details, and give pertipent date	pletion Report and Log for: s, including estimated date cal depths for all markers	of starting any	
2 1/16" Tubing use and Tubing salvage	d to produce Dakota	used to produce Mesone, set at 7447' then 1 1/4" tubing to back flow. Baker	will be pulled w will be run in h	ith Packer ole with	
	with reverse flow	Check Valve install			
report.	sion approval order	number, will be furn 5.	PEG	I ao _	
2			OIL CON	985 J	
18. I hereby certify that the foregoing is	true and correct		**************************************	1	
SIGNED (Charles C)	ique TITLE	Superintendent	DATE 7	9-85	
(This space for Federal or State office	(asc)		1111 1 1 1 N		
APPROVED BY	TITLE		DATE		
	an to o	D C. J.	put .	a Projekto	