

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1001-0135
Expires August 31, 1985
5. LEASE DESIGNATION AND ACREAL NO.

NM 03381

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Breech "B"

9. WELL NO.

172 E

10. FIELD AND POOL, OR WILDCAT

Blanco MV - Basin Dakota

11. SEC., T., R., W., OR ALK. AND
SURVEY OR AREA

Section 7 26N 6W

12. COUNTY OR PARISH 13. STATE

Rio Arriba

New Mexico

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.)

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Caulkins Oil Company

3. ADDRESS OF OPERATOR

P.O. Box 780 Farmington New Mexico 87499

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

890' F/S and 990' F/W

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, AT, CR, etc.)

6496 GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

RELL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 sonar wells sent to this work.)

9-17-87 Pulled 1 1/4" tubing. Removed plug.

Re-ran tubing.

RECEIVED
BUREAU OF LAND MANAGEMENT
FARMINGTON, NEW MEXICO

RECEIVED
SEP 24 1987
CR CON. DIV
DIST. 3

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

SIGNED Charles E. Dwyer TITLE Superintendent

DATE 9 17 87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

DATE _____

*See Instructions on Reverse Side

NMOCC

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.