## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

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		NTM	035	5

6.	IFIN	IDIAN,	ALLOT	TEE O	R TRIBE	NAME		

SUNDRY	NOTICES	AND	REPORTS	ON	WELLS
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(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 gas 本 well other
- 2. NAME OF OPERATOR
  Caulkins Oil Company

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)

- 3. ADDRESS OF OPERATOR
  P.O. Box 780 Farmington, New Mexico
- 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

  AT SURFACE: 858 From South & 927 From East AT TOP PROD. INTERVAL: Same
  AT TOTAL DEPTH: Game
- 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

Same

7. UNIT AGREEMENT NAME

- 8. FARM OR LEASE NAME Breech D
- 9. WELL NO.

LEACE

685 E

- 10. FIELD OR WILDCAT NAME
- Blanco Mesa Verde Basin Dakota
- 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Section 11 26 North 6 West
12. COUNTY OR PARISH 13. STATE

Rio Arriba New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) 6529 .GR.

SUBSEQUENT REPORT OF:

RECEIVED

Report results of multiple completion or zone change on Form 9–330.)

NOV 05 1982

S. GEOLOGICAL SURVEY FARMINGTON, N. M.

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.)\*

Caulkins Oil Company

First delivery report.

Breech D 685-E, Section 11, 26 North, 6 West, Rio Arriba County, New Mexico

Lease No. NM 03553

Mesa Verde & Dakota Zones from this well turned of New Mexico 10:00 AM 11-4-82.

NOV 1 0 1982

Company

: 75

ζ.

Subsurface Safety Valve: Manu. and Type \_

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

SIGNED Charles Cuque TITLE

que Superintendent

DATE

11-4-82

(This space for Federal or State office use)

COCEPTED FOR RECORDITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY

NOV 1982

NMOCC

\*See Instructions on Reverse Side

By FIK-