UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	SF 079304
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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:)	7. UNIT AGREEMENT NAME
1. oil gas gr	8. FARM OR LEASE NAME Sanchez
well well other	9. WELL NO.
2. NAME OF OPERATOR Caulkins Oil Company	4-E  10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR Longales	Blanco Masa Verde Basin Dakota
P.O. Box 780 Farmington, New Mexico	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	Section 25 26 North 6 West
AT SURFACE:890' From South & 990' From West	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Same	Rio Arriba New Mexico
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO. 1. 100 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF	6628 GR
REQUEST FOR APPROVAL TO:  TEST WATER SHUT-OFF  TEST WATER SHUT-OFF  TEST WATER SHUT-OFF	
FRACTURE TREAT	· · · · · · · · · · · · · · · · · · ·
REPAIR WELL NOV 0 5 198	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING \[ \square \]	change on Form 9–330.)
MULTIPLE COMPLETE  CHANGE ZONES  U. S. GEOLOGICAL S. FARMINGTON N.	SURVEY A RESULT OF THE SET
ABANDON*	
(other) Filing extension NTL 2B	
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.)*	
We hereby request 30 day extension of filing deadline of application for water disposal pit as required NTL 2B.	
Well is connected to El Paso Natural Gas Company.  Pit application will be completed within 30 days.	
Pit application will be completed within 30 days.	
Subsurface Safety Valve: Manu. and Type	Set @ Ft
18. I hereby certify that the foregoing is true and correct	මෙහිර වීඩා මිඩ දැදුරින ආරාමුම්ම රෝජ ශීඩිරීම
SIGNED Charles Clique TITLE Superintende	dent DATE 11-4-82
APPROVED BY  APPROVED BY	DATE DATE
CONDITIONS OF APPROVAL, IF ANY: NO.V.O 1982	
RV & DOD	
DISTRICT ENGINEER •See lestructions on Reverse	Side
Y	