Form 3160-5 (November 1983)	UNITED ST		SUBMIT IN TRIPLICAT	Budget Bureau Expires August  5. LEASE DESIGNATION	31, 1985	
(Formerly 9-331)	BUREAU OF LAND A		verse side)	SF - 07918		
			<del>///</del>	6. IF INDIAN, ALLOTTE		
	RY NOTICES AND or for proposals to drill or to use "APPLICATION FOR PERS				, va 12:02 Man	
I.	_			7. UNIT AGREEMENT NA	,XE	
WELL GAS WELL X	OTHER					
2. NAME OF OPERATOR				8. FARM OR LEASE NAI	(B	
	Caulkins O	il Company	- · · · · · · · · · · · · · · · · · · ·	Reuter		
3. ADDRESS OF OPERATOR				9. WBLL NO.		
P.O. Box 780 Farmington, New Mexico 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*				321-E	<del>-</del>	
See also space 17 below		rdance with any State	requirements.	10. PIELD AND POOL, O		
At surface	934' From S	South and 102	2¹ From East	11. SEC., T., E., M., OR I	erde-Basin Dakot	
				Section 15, 26	North 6 West	
14. PERMIT NO.	15. ELEVATIONS	(Show whether DF, NT, o	iR, etc.)	12. COUNTY OR PARISH	13. STATE	
		6563 Gr		Rio Arriba	New Mexico	
16.	Check Appropriate Box	To Indicate Natur	e of Notice Report of	r Other Data		
Mar	TICE OF INTENTION TO:	to maleate rigit.			1	
NO	FICE OF INTENTION TO:	F - [ ]		BEQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTERICA	siko	WATER SHUT-OFF	XX REPAIRING	FBLL	
FRACTURE TREAT	MULTIPLE COMPLET	re	FRACTURE TREATMENT	ALTERING C.	TRING	
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABANDONME	T*	
REPAIR WELL (Other)	CHANGE PLANS	6.U 1	(Other) (Note: Report res	ults of multiple completion	on Well	
17. DESCRIBE PROPOSED OR CO	OMPLETED OPERATIONS (Clearly rell is directionally drilled, give	state all pertinent det subsurface locations	ails, and give pertinent da	ompletion Report and Log for ites, including estimated dat rtical depths for all markers	e of starting any	
Drilled	1/4" hole at 8:00 12 1/4" hole to 3 9 5/8" 36# H-40 C	90'.				
Cemente	d 9 5/8" Casing wi wn 11:00 AM 7-18-	th <b>2</b> 50 sacks		ass "B" 3% CaCl.		
Cement	circulated to surfa	ace.				
Tested	surface casing wit	n 900# for 30	Minutes. No de	ecrease in pressu	re.	
	•			ECEIVE!		
			C	DIL CON. DIV.		
18. I hereby certify that the	e foregoing is true and correct			DIST. 3	<del></del>	
SIGNED MAL	les & Verque	TITLE	Superintendent	DATE	7-19-84	
(This space for Federal			ACC	SEPTED FOR RECOR	<u>D</u>	
	· · · · · <del> · · · ·</del>					
APPROVED BYCONDITIONS OF APPR	ROVAL, IF ANY:	TITLE		JUL <b>BATE</b> 1984		
JULIANIA OF MILL				*; 2.	· •	
		NMOCC		KWIINGTON KESOUKOE AKI	iA	
	*\$	ee Instructions on I	Keverse Side 💢 🖰 🕒			