

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 03354
2. NAME OF OPERATOR Caulkins Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 780 Farmington, New Mexico		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1090' From West and 1520' From North		8. FARM OR LEASE NAME Breech "C"
14. PERMIT NO.		9. WELL NO. 244-E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6605 Gr.		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde-Basin Dakota
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 14, 26 North 6 West
		12. COUNTY OR PARISH Rio Arriba
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PCCL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(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 zones pertinent to this work.)*

Reached TD 7575' 5-10-84

Ran new 5 1/2" J-55 Smls 8rd thd Casing as follows:

0' to 973'	5 1/2"	17#	J-55 Smls 8rd thd LT&C
973' to 6539'	5 1/2"	15.5#	J-55 Smls 8rd thd ST&C
6539' to 7575'	5 1/2"	17#	J-55 Smls 8rd thd ST&C

Stage Tool No. 1 set at 5574'. Stage Tool No. 2 set at 3401'.

Cement Baskets at 5721' and 3521'.

Centralizers on Casing at following Points:

7531', 7487', 7458', 7444', 7401', 7315', 7272', 7228', 7184', 7141', 7098', 7055', 5677', 5594', 5539', 5516', 5472', 5431', 5391', 5354', 5312', 5268', 3445' and 3361'.

Cemented 5 1/2" Casing in three (3) Stages.

(Over)

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

SIGNED Charles E. Deque TITLE Superintendent DATE 6-11-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE JUN 28 1984

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA
Jmm

First Stage thru shoe at 7575' with 250 sacks (412.5 Cu.Ft.) Light weigh 5 Plus 4% Gel, 12 1/4# Gilsonite per sack. Followed by 100 sacks (118 Cu.Ft.) Neat Cement. Plug down 7:45 PM 6-9-84.

Second Stage cemented thru Stage Tool set at 5574' with 250 sacks (412.5 Cu.Ft.) Light weigh 5 Plus 4% Gel, 12 1/4# Gilsonite per sack. Followed by 100 sacks (118 Cu.Ft.) Neat Cement. Plug down 8:50 PM 6-9-84.

Thrid Stage cemented thru Stage Tool set at 3401' with 550 sacks (907.5 Cu.Ft.) Light weigh 5 Plus 4% Gel and 12 1/4# Gilsonite per sack. Followed by 100 sacks (118 Cu.Ft.) Neat Cement. Plug down 11:45 PM 6-9-84.

Cement circulated on all three Stages.

Approx 5 bbls. slurry on first stage.

Approx 2 bbls. slurry on second stage.

Approx 7 bbls. slurry on third stage.