

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(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. OIL WELL ☐ GAS WELL ☒ OTHER ☐	5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Cont 97
2. NAME OF OPERATOR CONSOLIDATED OIL & GAS, INC.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache
3. ADDRESS OF OPERATOR P.O. BOX 2038, Farmington, N.M. 87499	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 1520' FNL & 1235' FWL (SE/NW) (F)	8. FARM OR LEASE NAME Tribal C
14. PERMIT NO. API#30-039-23475	9. WELL NO. 1E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7025' KB, 7012' GR	10. FIELD AND POOL, OR WILDCAT Wildhorse Gallup, ext.
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 6, T26N, R3W
	12. COUNTY OR PARISH Rio Arriba
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANE ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) ☒ Cmt information	

(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.)*

The top of the cmt for the 7-5/8" intermediate casing is 2980' from Cmt bond logs.

RECEIVED

AUG 29 1984

OIL CON. DIV.
DIST. 3

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

SIGNED Barbara Williams TITLE Engineering Ass't DATE 8-16-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

AUG 28 1984

NMOCC

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

RV